

Membership Application

Date _____

New Member or Renewal

*Include Annual and Renewal Membership Fee
of \$5.00 with this form*

Please Print Very Neatly

Name: _____

Street Address: _____

Po Box _____

City: _____

State _____ Zip: _____

Phone: (____) _____ - _____

E-Mail: _____ @ _____

**Please CHECK THE ANNUAL MEMBERSHIP
YOU HAVE CHOSEN**

Working - 10% off, 8 hours of volunteer work in
the store, sign up at your convenience!

Non Working - 5% off, no work requirement

Senior - 10% off, 62 and up, no work required

Your Signature

North Country

Food Co^{op}



25 Bridge Street Plattsburgh, NY 12901

Phone: 518 561 5904

Fax: 518 561 5904

Email: NCCOOP@westelcom.com