



MEMBERSHIP APPLICATION

For Office Use Only.

Date received: _____

Member Owner #: _____

Notes: _____

Contact Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone _____
:

Email: _____

Membership Agreement

1. I certify that I am at least 21 years old, not a member of the Bluenose Gopher Public House (the Co-op), and that the information I have provided above is complete and correct.

2. I agree to be bound by the policies and bylaws of the Co-op, and understand that they are subject to change through the procedures described in the Articles of Organization and Bylaws.

3. I understand that while purchase of a membership unit represents an equity investment in the Co-op, it is not a security. Membership units in the Co-op are not transferable and do not appreciate in value. Further, dividends will be paid on a patronage basis, and issued at the discretion of the Board of Directors.

4. I agree to maintain a valid electronic and physical address with the Co-op. I understand that should I not do so, my membership may be terminated under the procedures in the Articles of Organization and Bylaws.

5. I agree to receive communications from the Co-op electronically and through the United States Postal Service.

6. I understand that my membership is non-refundable and non-transferrable.

7. I understand that the price of a membership unit may change, subject to the discretion of the Board of Directors. Should the price change, I will not be expected to pay any additional funds, nor will I receive any refund.

8. I understand that my membership funds are subject to risks inherent in any start-up enterprise, as well as unique risks associated with operating in a heavily regulated industry. Such risk may result in the loss of part or all such funds. Membership equity investments are subordinate to all other debts of the Co-op. Understanding these risks, I agree to release the Co-op from any liability associated with the loss of all or part of my membership payment.

Signature: _____ Date: _____

Payment Plan: ☐ All at once (\$200.00) ☐ Two consecutive payments (\$100.00/month)

Payment Method: ☐ Cash ☐ Check ☐ Credit Card

☐ Yes! Please contact me about Bluenose Gopher Public House **volunteer opportunities**.

Favorite style and/or brand of beer: _____

Who referred you: _____

We would like to credit him or her!

Comments: _____