



**PENINSULA
CO-OP**

PENINSULA CO-OP MEMBER-OWNER APPLICATION

For a one-time \$27 investment (\$25 share purchase + \$2 administration fee) you receive a lifetime Peninsula Co-op membership. In accordance with the acceptance of this application by the Board of Directors, you agree to comply with the Rules of the Co-operative as they are now, and recognize that they may be amended by the members and Board of Directors.

Complete this application and bring in to the location nearest you OR sign up online at peninsulaco-op.com/membership

Last Name	First Name	Middle Initial
<input type="text"/>	<input type="text"/>	<input type="text"/>
Business Name/Community Group (Complete ONLY if membership is to be in that name)		BIN
<input type="text"/>		<input type="text"/>
Address		City
<input type="text"/>		<input type="text"/>
Province	Postal Code	Birthday
<input type="text"/>	<input type="text"/>	Month Day Year
Home/Cell Phone	Work Phone	Email
(<input type="text"/>)	(<input type="text"/>)	<input type="text"/>
Social Insurance Number*	* Your social insurance number is used by Peninsula Co-op to report the withholding tax deducted from your rebate, thus allowing Canada Revenue Agency to correctly allocate this remittance to your personal account, which you may be able to claim back when you file your income tax return.	
<input type="text"/>		

How did you hear about Peninsula Co-op?

- Friend or Family
 Drive By
 Newspaper
 TV
 Radio
 Website
 Social Media
 Magazine
 Event

Sign up to receive Membership Info emails and be entered to WIN a \$100 Co-op gas card!

I would like to sign up to receive the following email information:

- Important Member Info
 Director Election and Voting
 Co-op Promos and Offers
 Liquor Promos and Offers (must be 19+)

If a current member of Peninsula Co-op told you about us, please provide the following information so we can send them a gift card to express our appreciation.

Member Name	Member's Co-op Number	Employee name
<input type="text"/>	<input type="text"/>	<input type="text"/>

When you apply for a Peninsula Co-op membership, certain information is collected for the following purposes: Verifying your eligibility for membership; establishing and maintaining your membership; accounting services; communicating with you regarding your membership or other matters of concern to the Co-op and its members; detecting, preventing and deterring fraud; compiling statistics; offering you products and services to meet your needs; and meeting legal and regulatory requirements. Some of your information may be shared with a third party, for example, to facilitate the mailing of your member rebate. The information will only be that of which is necessary for completion of that purpose. Your signature on this application form indicates your consent to the use of the collected information. The security of your information is a high priority for Peninsula Co-op and we maintain appropriate safeguards to protect it.

Signature

Date

OFFICE USE ONLY

Received by	Location	Date Payment Received
<input type="text"/>	<input type="text"/>	Month Day Year
Member #	<input type="text"/>	

**WELCOME TO A DIFFERENT
KIND OF BUSINESS.**
peninsulaco-op.com

BRING COMPLETED APPLICATION TO THE LOCATION
NEAREST YOU FOR PROCESSING & PAYMENT.

**CO-OP
MEMBERSHIP**