



APPLICATION FOR TRANSFER OF EQUITY

PART 1

Member Name _____
Please print (Must be name membership is registered in)

Member Number _____

Address _____
Street City Postal code

Phone (____) _____

Birthdate ____ / ____ / ____
MM DD YYYY

Please transfer my membership in Peninsula Consumer Services Co-operative to the person named below in the following manner:

Please transfer _____ % **OR** Please transfer \$ _____

REASON FOR TRANSFER _____

If an ESTATE please complete: Executor's Name: _____
Date of Death: ____ / ____ / ____
Month Day Year Mailing Address: _____

City Province Postal Code (____) Area Code Phone Number

Must enclose a copy of the Death Certificate and one of the following:
▪ Page of the Will that names the Executor(s) of the Estate
▪ Court document that names the Executor(s) of the Estate
▪ Marriage certificate if there was no Will and this form is being completed by a spouse

Member's signature: _____ **Date:** _____
(Must be signed by Member, Administrator, or Power of Attorney)

Print Name (if signing on behalf of a business or individual): _____

PART 2

I hereby apply for Membership/Ownership in, and subscribe for shares of the capital stock of, Peninsula Consumer Services Co-operative based on the transfer of the above membership.

Please print
Name: _____ Home Phone: _____
Address: _____ Work Phone: _____

City Province Postal Code SIN: ____ / ____ / ____
Email: _____ Date of Birth: ____ / ____ / ____
Month Day Year

If you are already a member of Peninsula Co-op please complete: Member # _____ (if applicable)

New Applicant's Signature: _____ **Date:** _____

Print Name (if signing on behalf of a business or individual): _____

All applications are subject to approval by the Board of Directors at a Monthly Board Meeting.

<i>FOR OFFICE USE ONLY</i>	Common shares _____	Date approved by Board _____
	Preferred shares _____	
Revised 05/2023	Amount transferred _____	

Please sign form when completed and send to us by: mail to the address above; drop off at any Peninsula Co-op location; email to membership@peninsulaco-op.com together with supporting documents.