**Northwest Growers Cooperative**

**MEMBERSHIP APPLICATION**

I hereby apply for membership in and agree to abide by the articles of incorporation and bylaws of Northwest Growers Cooperative now and hereafter in effect, copies of which have been presented to me for inspection and maintained on the cooperative’s web site. I certify that I am a qualified member as defined in the bylaws, have tendered the initiation/membership fee, entered into an agreement with Marketing Services, INC., and met such other qualifications for membership as have been explained to me and listed below:

Obtained and maintain general liability insurance (minimum $1,000,000)

Obtained and maintain farmer/growers liability Insurance (minimum $3,000,000)

Entered into a grower’s agreement with Marketing Services, Inc.

Provided three references related to my ability to operate/maintain a farm

Provide timely payment of annual membership dues

After my membership shall have been in effect for one year from the date of its acceptance by the association, either party may terminate it by notifying the other party in writing of this intention between. If neither of the parties to this agreement so notifies the other, it is mutually agreed that this shall constitute conclusive evidence that the parties have renewed this agreement for another year. As a member we will have our business’ representative attend the annual membership and vendor-member orientation meeting to support communication and preferred vendor relationship building.

Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the member is an entity, please identify the authorized representatives of the entity:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s signature Date

**MAIL TO: Mike Smith, Northwest Growers Cooperative**

**100 Main Street, City, OH 45678**

**(Below For Office Use Only)**

**ACCEPTANCE:**

This certifies that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_is a member of and is entitled to all benefits, and privileges of membership in the association.

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Board of Directors Chairperson

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Board of Directors Secretary

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MAIL TO: Mike Smith, Northwest Growers Cooperative**

**100 Main Street, City, OH 45678**

