



## Membership Agreement

**Applicant's Statement.** I hereby apply for membership in Local Inland Northwest Cooperative Foods and agree to abide by the articles of incorporation and bylaws of the Cooperative, now and hereafter in effect, copies of which have been presented to me for inspection. I certify that I am a producer of agricultural products and located within the Inland Northwest region, have paid the annual membership fee of \$100, have signed a LINC Foods on-farm food safety checklist and had it approved by LINC Foods Board, agree abide by the LINC Foods Membership and Sales Policy which outlines our required growing practices, and met such other qualifications for membership as have been explained to me.

After my membership shall have been in effect for one year from the date of its acceptance by the Cooperative, either party may terminate it by as per the bylaws. 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 (each November).

Date \_\_\_\_\_, 20\_\_\_\_\_.

Applicant's: Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Applicant's signature \_\_\_\_\_

**Acceptance.** This certifies that \_\_\_\_\_ is a member of Local Inland Northwest Cooperative Foods and is entitled to all of the rights, benefits, and privileges of membership in the Cooperative.

Date \_\_\_\_\_, 20\_\_\_\_\_.

President: Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary: Name: \_\_\_\_\_

Signature: \_\_\_\_\_