

NISKAYUNA CO-OP APPLICATION TO PURCHASE STOCK
(Please Print)

Name _____ Soc Sec. # _____
Street _____
City _____ State _____ Zip _____
Telephone _____ Email _____

I hereby subscribe for _____ share(s) of capital stock in the Niskayuna Consumers' Cooperative, Inc. at \$5.00 per share to be recorded to the name printed Above.

I also apply for membership to said Co-operative and understand that my rights as Members are specified in the By-Laws.

Signed _____ Date _____

Card# _____ Cert.# _____

For Co-op Use only:

Name _____
\$ _____ in full payment for _____ shares of stock in the Niskayuna Consumers' Cooperative, Inc.

Cashier Signature _____

Date _____

Mail to:
The Niskayuna Consumers' Cooperative, Inc.
2227 Nott Street
Niskayuna, NY 12309