



THE CO-OP FEDERATION

## APPLICATION FOR MEMBERSHIP THE CO-OPERATIVE FEDERATION LTD

(a non-distributing co-operative without share capital)

**Name of Applicant:** \_\_\_\_\_  
(Name of Co-operative/Body Corporate)

**Postal Address:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_  
(Actual location)

**Phone:** (    ) \_\_\_\_\_ **Email:** \_\_\_\_\_  
(for service)

Has the applicant co-operative/body corporate been in existence for less than twelve (12) months?

YES  Go to Nominated Representative of Applicant

NO

Turnover less government grant funds for last financial year: 20\_\_\_\_/20\_\_\_\_ \$ \_\_\_\_\_

**Nominated Representative of Applicant:** \_\_\_\_\_

**Mobile:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Relationship to Applicant:** \_\_\_\_\_  
(Member/Director/CEO/Secretary/Other – please specify)

I am authorised to act on behalf of the applicant named above and I:

- apply for it to be admitted as a member of The Co-operative Federation Ltd
- appoint the above-named person to represent it in relation to its membership
- consent to the use of the above email address for the services of notices from the Federation.

If this application is approved, the applicant agrees:

- it will pay all fees required by the Federation
- it will be bound by the Rules of the Federation
- that the contact details of the applicant may be circulated to all other members of the Federation to assist with networking amongst co-operatives.

\_\_\_\_\_  
(Name of Director/Secretary)

\_\_\_\_\_  
(Signature of Director/Secretary)

\_\_\_\_/\_\_\_\_/\_\_\_\_  
(Date)