



Application To Purchase Stock

Niskayuna Consumer's Cooperative, Inc.

(Please Print)

(For Office Use Only)

Card# _____

Cert# _____

Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Phone: _____ Social: _____

Email: _____

Please subscribe me to the following Email lists: Member Sales Co-op News

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 Cooperative and understand that my rights as a member are specified in the By-laws.

Sign: _____ Date: _____

(For Office Use Only)

Received By: _____ Date: _____

Niskayuna Consumers' Cooperative, Inc.

Membership Privacy Policy

We value your membership and will make every effort to protect your privacy.

We will not share your personal information.

Social Security numbers are required by law when purchasing a stock certificate. We will protect your social security number by securely filing your application. It will not be entered into a computer database.

Mail To:

Niskayuna Consumers' Cooperative, Inc.
2227 Nott Street
Niskayuna, NY 12309