



# GRANGE REWARDS PROGRAM: PARTNER APPLICATION

*I hereby elect to participate as a Partner\* in the Grange Rewards Program*

NAME: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

WITH THIS COMPLETED APPLICATION, I HAVE ENCLOSED MY ONE-TIME FEE

- \$20
- \$15 (if a member of another co-op/credit union) \_\_\_\_\_ (name of co-op/credit union)
- Fee waived for eligible students enrolled in 4-H, FFA, or equine programs
- Fee waived for Military Veterans

## GRANGE REWARDS BENEFITS:

- ❁ *Everyone can apply; signing up is easy*
- ❁ *We match 100% of your one-time fee and donate the funds to the youth of our local communities through FFA, 4-H, and the purchase of livestock projects at local fairs*
- ❁ *Receive valuable offers and timely information via email*
- ❁ *Your purchase history is readily available in-store and online*
- ❁ *Partner Dividends may be paid in the following calendar year (see dividend fact sheet on our website for information)\*\**

\*This application is for enrollment as a Partner (Non-Member Patronage Contract) in the Grange Rewards Program.

\*\*Purchases must be made using your Grange Co-op Rewards Account. Dividends may be subject to taxes.

*This program may be modified by action of the Board of Directors of Grange Cooperative Supply Association.*

<p><b>RETAIL STORE USE ONLY</b></p> <p>Date payment received _____</p> <p>Please attach duplicate receipt to application before sending to main office</p>	<p><b>OFFICE USE ONLY</b></p> <p>Date welcome packet mailed _____</p> <p>Account number assigned _____</p>
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GC-926 6/2016