



GRANGE REWARDS PROGRAM: PARTNER APPLICATION

I HEREBY ELECT TO PARTICIPATE AS A PARTNER IN THE GRANGE REWARDS PROGRAM*

NAME: _____ PHONE: _____ CELL PHONE: _____

EMAIL ADDRESS: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

SIGNATURE: _____ BIRTH 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 _____ (club/chapter name)
Project Animal(s): _____
- Fee waived for veterans and active military personnel (Must show valid Veteran ID, Military ID, DD214)

GRANGE REWARDS BENEFITS:

- Earn up to 1% rewards on most retail purchases
- Veterans and active military earn up to 5% rewards on most retail purchases
- Everyone can apply; signing up is easy
- 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.

***Promotions may be sent via email/SMS

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

RETAIL STORE USE ONLY

Date payment received _____

Please attach duplicate receipt to application before sending to main office

OFFICE USE ONLY

Date welcome packet mailed _____

Account number assigned _____

GC-1754 7/2018