Purple Carrot Market Founding Owners Application

Primary Member Name:	Additional Household Member Names:	
Address:		
City:	State:	Zip:
Phone:	Email:	

Please check the following to acknowledge your understanding and consent:

- ❏ I understand that I can find the articles of incorporation and bylaws on the Purple Carrot website or request a copy.
- ❏ I understand that, as with any investment, my founding equity share is subject to risk. If the co-op is unsuccessful, all owners will get an even split of what remains after all expenses and loans (if any) are paid.
- ❏ I understand that my ownership is subject to the bylaws of the co-op.
- ❏ I hereby intend to purchase one Initial Owner Equity Share in The Purple Carrot Market at $200.00 per share.

Check the type of payment you are choosing:

- ❏ Pay in Full: $200.00
- ❏ Payment Plan: $50.00 down payment with three quarterly payments of $50.00 each for a total of $200.00. *By choosing this Payment Plan, you agree to pay owner equity shares in full within one year.*

Check the method of payment you are using:

- ❏ Cash $_____   ❏ Check #_____   ❏ Credit Card

Please make checks payable to: The Purple Carrot Market

Signature:	Date:

How do you prefer to receive updates? (Select all that apply)

❏ Email   ❏ Website   ❏ Mail   ❏ Facebook

How did you hear about the Purple Carrot Market? (Select all that apply)

❏ Yard Sign   ❏ Website   ❏ Word of Mouth   ❏ Facebook

Application and payment can be placed in the drop-box inside the Purple Carrot Market office at the Victor Mall building (53 E Broadway) or mailed to:
The Purple Carrot Market
 PO Box 724
 Little Falls, MN 56345

- ❏ Referral by a Purple Carrot Market Owner
  Please share the name of the person who referred you:
  _____
- ❏ Check this box ONLY if you would like to opt out of being publicly recognized as a Purple Carrot Market Owner and remain anonymous.

If payment is made by cash, tear or cut this receipt on dotted line.

Cash Payment Receipt for The Purple Carrot Market Owner Equity Share

	Date:
$_____ cash payment made by (your name) _____	
Cash payment received by (name of person receiving payment) _____	Date: