



## A Producer/Consumer Cooperative

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Market address: 116 Main St., Philmont, NY 12565 • Telephone: 518-672-7673 • [philmontcooperative.com](http://philmontcooperative.com)  
Mailing address: P.O. Box 32 Philmont, NY 12565  
[info@philmontcooperative.com](mailto:info@philmontcooperative.com)

### MEMBER-OWNERSHIP AGREEMENT

#### MISSION

*Philmont Market & Café Cooperative is a producer/consumer, cooperatively owned market and café, which cultivates a community-based food system and provides equitable access to affordable, nutritious foods; strengthens our local economy; and fosters sustainable living.*

I, \_\_\_\_\_, do hereby agree to participate in Philmont Market & Café Cooperative, Inc. (PMCC), a New York State General Cooperative Corporation, as an active Member-Owner subject to the following terms and conditions:

1. I have read or have had the opportunity to read the Company By-Laws and understand that I must abide by the By-Laws of the Company.
2. I understand that non-refundable equity investment are required of the Member-Owners and that such ownership investment is \$100. Dues may be changed at the discretion of the Board of Directors (BOD).
3. Any potential Member-Owner may provide 10 hours of volunteer work in lieu of the equity investment. Such hours must be verified. All 10 hours must be completed before a Member-Owner is eligible for any patronage distributions.
4. Provided that I remain in good standing with PMCC, I will have one vote as a Member-Owner. A member's entire household or business entity may use the services of PMCC, but the member and his/her household will be entitled to only one member vote.
5. If I choose to pay my Member-Ownership investment in installments, my right to vote will vest when PMCC receives my final payment in full. The Board reserves the right to terminate membership of an individual or a collective household at any time for reasons defined in the By-Laws, including illegal activities or actions that adversely affect the operations of PMCC, such as theft, violence, or harassment of persons conducting the business of PMCC or doing business with PMCC.
6. I understand that the intent of PMCC is to provide an opportunity for producers and consumers to sell/buy local and New York State produced food.

7. I understand that a percentage of the proceeds from each sales transaction will be retained by PMCC for operating expenses. The BOD will establish this percentage annually at its discretion.
8. Patronage dividends, if any, are at the discretion of the BOD; only paid-in-full members are eligible to receive them.

Signed this \_\_\_\_ day of \_\_\_\_\_, 20\_\_:

Signature \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number : \_\_\_\_\_

Email Address: \_\_\_\_\_

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|--------------------------|-----------------------------------|
| <input type="checkbox"/> | <u>\$100 Member-Ownership Due</u> |
| <input type="checkbox"/> | <u>\$25 Installment payments</u>  |

Please make checks payable to:  
PMCC

Please mail checks to:  
P.O. Box 32  
Philmont, NY 12565