



Owner/Membership Application

Thank you for joining us on our mission to bring healthy food options to downtown Fond du Lac! Your membership will help open the co-op doors soon.

Owner(s): _____

Address: _____

Phone Number(s): _____

Email(s): _____

Payment Options

_____ \$200 lifetime membership (paid in full, no processing fee)

_____ \$50/year paid over 4 years (\$5 processing fee per transaction)

_____ \$25/year paid over 8 years (\$5 processing fee per transaction)

Make checks payable to:

Farm2Table Co-op & Café

Mail completed form and payment to:

Farm2Table Co-op & Café

P.O. Box 1719

Fond du Lac, WI 54935

Office use only

Board member initials: _____

Paid: Y / N

Date accepted: _____