



Ownership Status Request

Fill in this section completely for all requests:

This is a new address.

OWNER NUMBER _____ DATE _____

NAME _____

OWNER SIGNATURE _____
(required)

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE () _____

EMAIL _____

EMAIL ME SALES & MONTHLY E-NEWSLETTER

EMAIL ME THE SEMI-MONTHLY CATALYST (MAGAZINE) NEWSLETTER

I hereby request an owner scan card for myself.

Additional Household Card Request

I hereby request additional household cards for the individuals listed:

1. _____ 2. _____

3. _____ 4. _____

All the listed individuals live with me full-time and share life expenses (mortgage/lease, food, and related living expenses). Please extend my shopping privileges to these individuals. I understand that those listed are NOT owners of New Pioneer Food Co-op and do not have the privilege of voting or receiving patronage rebates.

Owner Share Withdraw Request

I would like to cancel my owner share and receive a refund. (This refund is only issued to the owner shareholder and must include the owner's signature.) The refund check will be mailed to the address above.

OWNER SIGNATURE _____
(OR ESTATE EXECUTOR/POWER OF ATTORNEY)

Owner Name Change Request

Please indicate former name and current name. You cannot transfer the owner share to a different person. **This request must include a verification of name change. Please provide a copy of driver's license, passport, or court order.**

FORMER NAME _____

FORMER SIGNATURE _____

CURRENT NAME _____

Senior Status Request

I, the owner shareholder, hereby request that you change my ownership type to senior status. I have reached the age of 60 and would like to qualify for any special senior promotions and offers.

OWNER BIRTH DATE IS _____

All requests must be approved and implemented by the Co-op Support Office, 22 S. Linn St., Unit 2A, Iowa City, IA 52240.