



**ONTARIO NATURAL FOOD CO-OP**  
 5685 McLaughlin Road Mississauga Ontario L5R 3K5  
 p. 905.507.2021 f. 905.507.2848

## RETAIL MEMBERSHIP APPLICATION FORM

### MEMBERSHIP CRITERIA

**Group A = Co-operative**

A Group A retail member is a co-operatively structured business.

**Group B = Natural Food Business**

A Group B retail member is a non-collectively owned business entity that is a customer of Ontario Natural Food Co-op. This business entity derives more than 50% of its revenue from the sales of natural food and health products.

I, the undersigned, acknowledge that \_\_\_\_\_ (store name and street) meets the Ontario Natural Food Co-op Group \_\_\_\_ (Group A or Group B) membership criteria outlined above. Enclosed is a \$10.00 cheque to cover the one-time membership fee.

Print Name of Signatory:

Signature:

Role of Signatory:

Date:

### BUSINESS INFORMATION

Name of Store:

Name of Owner:

Name of Voting Member:

Address:

City:

Prov.:

Postal Code:

Tel:

Fax:

email:

Business Type:

Years in Business:

Area/Size of Store:

# of Employees: FT =                      PT =

Sales for last 12 months (optional):

Departments Ordering:  Grocery  Cooler  Frozen  Health/Beauty  Household  Other:

How would you characterize your community?  Urban  Suburban  Rural  Other -

### DEPARTMENTAL PURCHASING INFORMATION

Senior Manager Name:

email/tel:

Dept:

Person:

email/tel:

Dept:

Person:

email/tel:

Dept:

Person:

email/tel:

Dept:

Person:

email/tel:

Dept:

Person:

email/tel:

**Please list 3 things that the ONFC Member Program can do to help make your business thrive:**

1.

2.

3.

**For more information about membership at ONFC please contact Adriana Zylinski, Member Services Coordinator, at:**

Toll free tel: 1-800-387-0354 Toll free fax: 1-866-218-2848 tel: 905-507-2021 x327 or email: membership@onfc.ca

**Send completed form and cheque made payable to Ontario Natural Food Co-op to:** Adriana Zylinski  
 5685 McLaughlin Road Mississauga ON L5R 3K5