



CO-OP FOOD FOR ALL

Who is eligible?

Food For All is a Member Assistance Program for participants in SNAP, WIC, and Home Heating Assistance, recipients of VA Benefits, and for clients of CVOEO, HOPE, WomenSafe, and the Open Door Clinic.

What do I get?

- 🍃 You get a 10% Discount on all purchases, every day
(excludes alcohol, by law)
- 🍃 You become a Member-Owner of the Co-op – your annual \$20 share is paid by MNFC, allowing you to build equity, accrue a patronage dividend and have a voice in Co-op Elections
- 🍃 All Food for All member benefits are shared with the people in your household
(children, domestic partners, parents living with you, etc..)

How do I sign up?

- 🍃 Fill out the application inside
 - 🍃 Show us your current EBT or WIC benefits card
(we'll make a copy when you come in)
- OR
- 🍃 Bring us a letter of eligibility from one of our partner organizations
(CVOEO, HOPE, WomenSafe, and Open Door Clinic)
They'll know what to do!

WHAT'S NEXT?

Membership Services will notify you that your application has been processed. If you are joining for the first time, we'll send you a member-owner packet by mail.

Once approved, you will become a member-owner, and can then use your member card to begin receiving a 10% discount on your purchases each time you shop. This discount is valid for 12 months.

Membership services will notify you one month prior to your expiration date, at which time you may reapply with a new application and updated verification.



Middlebury Natural Foods Co-op
Open Daily 8am-7pm
9 Washington Street
Middlebury, VT 05753
middlebury.coop
802-388-7276



Application

Date: _____

Already a Member-owner? Please write your member number here: _____

Name: _____

Address: _____

Phone: _____ Date of Birth: _____

Email: _____

I have attached or shown:

- | | |
|--|--|
| <input type="checkbox"/> Statement from DCF for food stamp benefits | <input type="checkbox"/> Copy of current WIC or EBT card |
| <input type="checkbox"/> Home Heating Assistance Statement | <input type="checkbox"/> Farmacy Member Documentation |
| <input type="checkbox"/> Letter of eligibility from partner organization
(SNAP, WIC, and Home Heating Assistance, and for clients
of CVOEO, HOPE, WomenSafe, and the Open Door Clinic) | <input type="checkbox"/> Copy of VA Benefits Card |
| <input type="checkbox"/> I understand that: | |
| ✓ My information will be used for co-op membership and the Food For All Program only | |
| ✓ I will be contacted when it is time to renew | |
| ✓ My information is confidential | |

- ✓ The Food For All discount may not be combined with any senior, member-worker, or staff discounts.
- ✓ The Food For All discount will not affect your eligibility for any other Sales or Promotions.
- ✓ The Food For All discount will not be applied to non-discountable items such as alcohol and newspapers.

Questions? Contact Membership Services at **membership@middlebury.coop**

1 Washington Street • Middlebury • Vermont • 05753 • 802-388-7276 • www.middlebury.coop

CO-OP USE ONLY

Date received: _____

By: _____

☐ Approved

☐ Not Approved

Date Discount on: _____

Date Member-owner notified: _____

Date Discount off: _____