



Regency Cooperative Membership Form

Name _____

Address _____

Own or Rent Own Rent

Phone Number _____

E-mail Address _____

Complete this form, **make check payable to the Regency Cooperative**
in the amount of **\$35**, and mail both items to:

Regency Cooperative Association
14658 Gap Way
P.O. Box 173
Haymarket, VA 20169

*The Regency Cooperative is exempt from Federal income taxes under Section 501(c)(7) of the Internal Revenue Code.
Membership dues or other payments by members are not tax deductible.*

The Co-op **does not** provide phone numbers or email addresses to vendors!

Internal Use Only

Date received _____ Check # _____

Added to _____ Added to _____ Welcome letter _____ Destroy _____