

Regency Cooperative Membership Form

Name		
Address		
Own or Rent □	Own □ Rent	
Phone Number		
E-mail Address		
Complete th	nis form, make check paya in the amount of \$45 , and	ble to the Regency Cooperative d mail both items to:
	Regency Cooperati 14658 Gap P.O. Box Haymarket, V	o Way 173
The Regend	cy Cooperative is exempt from Fede of the Internal Rev	ral income taxes under Section 501(c)(7) enue Code.
Mer	mbership dues or other payments by	members are not tax deductible.
The Co-c	op does not provide phone numb	pers or email addresses to vendors!
	Internal Use	e Only
Date Received	Check #	Added to Sheet
Added to website	Welcome letter sent	Destroy check