

**SAN JOSE COOPERATIVE BREWERY & PUB, INC.
MEMBERSHIP APPLICATION**

First Name:

Middle Initial:

Last Name:

Date of Birth:

Phone:

Current address:

City:

State:

ZIP Code:

Phone:

Email:

JOINT MEMBER INFORMATION (IF JOINT MEMBERSHIP)

First Name:

Middle Initial:

Last Name:

Date of birth:

MEMBERSHIP TYPE (PLEASE CHECK ONE)

Member

Business Member

SIGNATURES

I hereby attest that the information provided on this form is correct and agree to abide by the bylaws of the San Jose Cooperative Brewery & Pub, Inc.

Signature of applicant:

Date:

Signature of joint member (if needed):

Date:

**SAN JOSE COOPERATIVE BREWERY & PUB, INC.
DISCLOSURE DOCUMENT**

San Jose Cooperative Brewery & Pub, Inc. is incorporated as a cooperative under the California Consumer Cooperative Corporation Law.

By writing to 125 Gifford Ave, Apt 3, San Jose, CA 95110, members and prospective members may receive free of charge information regarding the following matters, among others: restrictions upon the transfer of memberships; conditions for levying of dues, assessments, etc.; amount and nature of services to be contributed by members; conditions under which memberships are redeemable; and rules by which the voting power and proprietary rights of membership are to be determined. These matters are addressed in the cooperative's Articles of Incorporation and Bylaws, which will be furnished without charge to a member or prospective member upon written request.

ACKNOWLEDGEMENT OF TAX RESPONSIBILITY

I agree that for purposes of determining the amount of any distributions made to me by this cooperative, I shall treat the full amount of any distributions, with respect to my patronage, which are made in written notices of allocation (as defined in 26 U.S.C. §1388), which I receive, as income received in the year in which such written notices of allocation are received at their stated dollar amounts in the manner provided in 26 U.S.C. §1385(a).

Member Name (Printed)

Signature

Date

Address

Phone

Email

Date of Birth