

**Contact Information (PLEASE PRINT)**

First	MI	Last		
Mailing Address		City	State	Zip
Preferred Phone # ( )		Email Address*		

\*Providing your email address gives explicit permission for the Co-op to email you required member-owner communications, such as voting information, and changes to bylaws or member-owner benefits.

**Preferred Method of Contact:**  US Mail **OR**  Email\*\* (select one)

\*\*If you're joining GreenStar through FLOWER you'll receive a Member Packet via US Mail; future correspondence will be sent via email  
A qualification notice is sent within 3 weeks of applying and a reminder letter 30 days prior to your FLOWER discount expiration

**Do you want to receive your sale receipts via email?**  Yes

**GreenStar Member #** (if applicable): \_\_\_\_\_

**Please indicate your current GreenStar Membership status (check one):**

- I'm a current or former **FLOWER** participant reapplying for the program
- I'm a current Member-Owner whose membership is up-to-date
- I am or was a Member-Owner, but my membership is not up-to-date
- I've never been a GreenStar member-owner\*

\*If you qualify for FLOWER and have never been a member-owner, you will receive a one year trial membership

**Confidentiality & Privacy:**

Your information will be used for co-op membership and the FLOWER program only. Your information is confidential, and will not be sold to marketers.

**How did you hear about GreenStar's FLOWER Program? (Select all that apply)**

TCAT Bus  In-Store

Radio  Newspaper  Social Media  Word of Mouth Other: \_\_\_\_\_

**Eligibility Requirements are listed on the back of this form.** To apply, bring a completed application, one qualifying document and photo ID to the Customer Service representative at any GreenStar Food Co-op location.

**Terms of Participation in FLOWER:**

- The 13% FLOWER discount is valid for one year and needs to be reapplied for yearly.
- Neither the discount nor GreenStar membership may be shared with another adult, including a spouse or partner. Doing so violates GreenStar Co-op's Standards of Conduct, which could result in the loss of your membership.
- There are no retroactive discounts if your GreenStar membership or FLOWER discount expires.
- GreenStar member-owner equity payments need to be up to date to be eligible for member-owner benefits, including the FLOWER discount.
- Co-op Deals, Owner Deals, Flash Sale items and Alcohol don't receive any discount.
- It may take up to two weeks for your FLOWER application to be processed.

I have read and understand the above Terms of Participation in FLOWER. I understand that failure to comply with these terms will result in deactivation of the FLOWER discount.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*GreenStar Co-op is committed to being an inclusive organization free from discrimination. We seek out and welcome people from diverse communities to participate in a community-owned cooperative business structure.*

**FOR STAFF Use Only:** Qualifying Doc verified:  Photo ID verified:   
FLOWER Coupon Serial Number: \_\_\_\_\_ Date Received: \_\_\_\_\_ Staff Initials: \_\_\_\_\_



Application valid through 11/30/20

**Eligibility Documentation** → Please bring the following:

- (1) the qualifying document for **ONE** of the programs listed below **AND**
- (2) one form of photo ID (for example, Drivers License, Sheriff's ID, EBT Card, Student ID, Passport, etc.).

**All qualifying documents must state the applicant's name**, unless otherwise specified in the chart below.

Program	Qualifying Document
SNAP	<p><b>One</b> of the following:</p> <ul style="list-style-type: none"> <li>• Current EBT Card in applicant's name &amp; Grocery Receipt dated within 1 month of application that shows EBT was used, <b>OR</b></li> <li>• Current Budget Sheet, <b>OR</b></li> <li>• Current Legal Notice of Eligibility (<i>showing qualification period or dated within 6 months of FLW app</i>)</li> </ul>
TANF Cash Assistance	<p><b>One</b> of the following:</p> <ul style="list-style-type: none"> <li>• Current EBT Card in applicant's name &amp; Grocery Receipt dated within 1 month of application, <b>OR</b></li> <li>• Current Budget Sheet, <b>OR</b></li> <li>• Current Legal Notice of Eligibility (<i>showing qualification period or dated within 6 months of FLW app</i>)</li> </ul>
WIC	<p><b>One</b> of the following:</p> <ul style="list-style-type: none"> <li>• Current WIC Card &amp; Grocery Receipt dated within 1 month of application, <b>OR</b></li> <li>• Current NYWIC Shopping List, with your name and benefit dates showing, <b>OR</b></li> <li>• Current Benefit statement screen on the WIC2GO app</li> </ul>
Medicaid	<p><b>One</b> of the following:</p> <ul style="list-style-type: none"> <li>• State-issued Medicaid Benefits Card, <b>OR</b></li> <li>• Insurance Card that states Medicaid, <b>OR</b></li> <li>• Current Awards Letter (<i>FLOWER application date must be within one year from date of awards letter</i>)</li> </ul>
Free School Lunch	<ul style="list-style-type: none"> <li>• Qualification Letter (<i>Reduced School Lunch does not qualify</i>) - The parent not indicated as the addressee may use the letter to qualify provided the name of the legal dependent is included in the letter</li> </ul>
Healthy Food for All	<ul style="list-style-type: none"> <li>• Qualification Letter</li> </ul>
SSI or SSDI	<ul style="list-style-type: none"> <li>• Current Awards Letter</li> </ul>
Pell Grant	<ul style="list-style-type: none"> <li>• Current Year Awards Letter <b>OR</b> Financial Aid Summary form (<i>with Pell Grant indicated</i>)</li> </ul>
Unemployment <i>Temporary qualifier through 11/30/2020</i>	<p>In response to COVID-19, we are temporarily accepting unemployment as a qualifier for FLOWER</p> <ul style="list-style-type: none"> <li>• Unemployment documentation <b>OR</b></li> <li>• Letter from former employer stating that applicant's employment has been terminated, including:                             <ul style="list-style-type: none"> <li>⇒ Name of business organization, printed name and signature of employer, and employee's name</li> </ul> </li> </ul>

**GreenStar Food Co-op Locations & Website**

<b>Main Store</b> 770 Cascadilla St. Ithaca, NY 14850	<b>DeWitt</b> 215 N. Cayuga St Ithaca, NY 14850	<b>Collegetown</b> 307 College Ave Ithaca, NY 14850	<b>Website</b> www.greenstar.coop https://greenstar.coop/flower/
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If you have any questions, please ask for **Member-Owner Services** in the store OR  
**Phone:** (607) 273—9392      **Email:** [membership@greenstar.coop](mailto:membership@greenstar.coop)

<p><b>Member-Owner Services Use Only:</b></p> <p><b>Reviewed By:</b> _____</p> <p><b>Member #:</b> _____</p> <p><b>Valid Date:</b> _____</p> <p><b>Membership Status Upon Applying:</b></p> <p><input type="checkbox"/> Current</p> <p><input type="checkbox"/> Expired [ <input type="checkbox"/> Renewed upon Applying]</p> <p><input type="checkbox"/> NonMember</p>	<p><b>Approval Status:</b></p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved pending Renewal</p> <p><input type="checkbox"/> Not Approved</p> <p><b>Participation Status:</b></p> <p>Date Discount Applied: _____</p> <p>Date Discount Expires: _____</p> <p>Reminder Letter Due: _____</p> <p>Eligibility Letter Sent: _____</p>	<p><b>Mailing Preference:</b></p> <p><input type="checkbox"/> US Mail    <input type="checkbox"/> Email</p> <p><b>Processing Status:</b></p> <p><input type="checkbox"/> SMS Completed</p> <p><input type="checkbox"/> Approval Letter &amp; Bulk Bag Sent/Given</p> <p><input type="checkbox"/> Participant Database Completed</p> <p>If New/Expired &amp; Didn't Process in Person:</p> <p style="padding-left: 20px;">Date Called Member: _____</p> <p><b>For Reactivated Participants Only:</b></p> <p>Former Disc Exp Date was: _____</p>
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