



NEW MEMBER INFORMATION FORM AND KITCHEN APPLICATION

Please submit all of the details we need to build your Membership Agreement.
There is a \$50 application fee.

Form and payment may be submitted electronically by filling out this form and submitting to vernsfoods@gmail.com. An invoice for the \$50 application fee will be emailed to you, which you can pay online.

or

Print and fill out this form, send along with your check made out to Our Community Kitchen, 4419 Harrison Ave. NW #104, Olympia, WA 98502.

Your Name

First Name
This field is required

Last name

Best Contact Phone Number

Please enter a valid phone number
This field is required

Name of Person who is signing Member Agreement (a legal document)

First Name
This field is required

Last name

Name of Legal Entity

This field is required

Doing Business As (re-enter if it's the same as your legal entity)

This field is required

WA State UBI#

This field is required

Official Email for notices and other Communications

This field is required

Official Email for Invoices / Billing

This field is required

Ideal Start Date (we will use this date for your Membership Agreement)

Please note that if the date you enter is less than 3 weeks from now, we will push the date out to the next month on the contract, and then prorate a partial first month if you're able to get everything done quickly.

How did you hear about us?

Is there any other info we need to build your Membership Agreement?

Tell us a little about yourself:

How long have you been in business?

Do you have any health conditions or impairments that require specific or specialized equipment?

Type here