



This institution is an equal opportunity provider and employer.

Membership Application

Member Number _____

Use full legal name (please print or type). If your account is a joint account, make sure to list the persons holding the account.

Please check which describes the type of account: _____ Individual _____ Joint

Applicant Name	Middle Initial	Last Name	Social Security Number	Birthdate
Mailing Address			City	State
Primary Phone # home / cell		Additional Phone # home / cell	e-mail address	

Joint Applicant Name	Middle Initial	Last Name	Social Security Number	Birthdate
Primary Phone # home / cell			Additional Phone # home / cell	e-mail address

_____ (hereinafter called the “Applicant”) hereby applies for membership for one or more service connections and agrees to purchase electric energy from Dakota Valley Electric Cooperative (hereinafter called the “Cooperative”).

In making application for membership, the undersigned further agrees to comply with and be bound by the Articles of Incorporation and the Bylaws and any amendment thereto and such rules, regulations and policies as may from time to time be adopted by the board of directors.

The applicant further agrees that upon the acceptance of this application by the Cooperative, this document shall constitute a binding agreement between the Applicant and the Cooperative and shall continue thereafter until terminated by either the applicant or the Cooperative. This agreement shall be in addition to the Bylaws, policies, and any separate contract(s) made and entered into by the applicant and the Cooperative.

Dated this _____ day of _____, _____

Applicant’s Signature

Joint Applicant Signature

Applicants Racial/Ethnic Group:
 Caucasian African American American Indian
 Hispanic Asian Native Hawaiian/Pacific Island Other

WHY PROVIDE THIS INFORMATION:
As a participant in a federal utilities financing program Dakota Valley Electric Cooperative, Inc. is required to identify and document as accurately as possible, the racial/ethnic data on eligible population in our service area. The information you provide will be used only for FEDERAL GOVERNMENT REPORTING PURPOSES and your response is optional.

Dakota Valley Electric Cooperative President

Dakota Valley Electric Cooperative Secretary

Date Approved

(co-op seal)

Dakota Valley Electric Cooperative
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www.dakotavalley.com / 1-800-342-4671