



# MEMBERSHIP APPLICATION

Welcome to our Cooperative Family!

## MEMBER INFORMATION

<b>ACCOUNT NUMBER:</b>		<b>METER NUMBER (if available):</b>	
Last	First	Middle	
Mailing Address		City, State and Zip Code	
Date of Birth	Social Security Number	<b>PHONE NUMBERS</b>	
Driver's License Number	State Issuing License	Primary/Home:	
Employer		Cell:	
Email Address		Work:	
CONNECT SECURITY LIGHT	<input type="radio"/> YES <input type="radio"/> NO	<b>BY PROVIDING SOUTHWEST ARKANSAS ELECTRIC COOPERATIVE WITH YOUR PHONE NUMBER, YOU CONSENT TO RECEIVE AUTOMATED CALLS FROM THE COOPERATIVE FOR COLLECTION AND OTHER PURPOSES.</b>	
AUTOPAY (automatically deduct from your bank account, credit card, or debit card)	<input type="radio"/> YES <input type="radio"/> NO		
Would you be interested in our internet service?	<input type="radio"/> YES <input type="radio"/> NO		
<b>MEMBER SIGNATURE</b>			

## CO-MEMBER INFORMATION

Co-member will have equal rights to the account. Co-member will also be equally responsible for the bill.

Last	First	Middle	
Mailing Address		City, State and Zip Code	
Date of Birth	Social Security Number	<b>PHONE NUMBERS</b>	
Driver's License Number	State Issuing License	Primary/Home:	
Employer		Cell:	
Email Address		Work:	
<b>CO-MEMBER SIGNATURE</b>			