

## **DAIRYGOLD CO-OPERATIVE SOCIETY LIMITED**

## **APPLICATION FOR ORDINARY SHARES**

I, the undersigned, hereby apply for		Ordinary Shares of €1 each
in the above-named So	ciety in respect of wh	nich I attach herewith cheque in the
amount of €	and I agree to be bo	und by the Rules of the Society and by
any regulations made t	hereunder.	
SIGNATURE OF APPLICANT:		A/C No
NAME:	(Block Capitals)	
ADDRESS:		
DATE:		
<b>DATE OF BIRTH:</b> (Please enclose evidence	of age e.g. copy birth o	cert / driver's licence / passport).
* WITNESS:		
ADDRESS:		
EMAIL ADDRESS:		
Committee of Dairys OR	old Co-Operative Society	
B) Solicitor, Postmaster The witness must stamp the	, Doctor, Member of An C c form with the official sta	
Date of Board Meeting (for	office use only):	



## **Application for Ordinary Shares Form Guidelines**

- To become a shareholder member of the Society, the Board currently requires that any applicant meets certain criteria. Please contact the Secretary's Office on 025 44068 for more details.
- o If you meet the criteria and wish to purchase shares the Application for Ordinary Shares Form must be completed and witnessed.
- Each applicant must forward evidence of age i.e. copy Birth Certificate or copy Driver's Licence or copy Passport.
- Certificate of Land Ownership and Electronic Funds Transfer Form must be completed and returned with this Form.
- o If you are an existing shareholder and wish to purchase additional shares this form please complete and return.

Please return the Form to: Secretary's Office, Dairygold Co-Operative Society Ltd., Clonmel road, Mitchelstown, Co. Cork.