



The Data Commons Cooperative

Connecting the Cooperative Economy

Member Agreement

Data Commons Cooperative

Member's Name (organization or individual):

Address:

Telephone Number:

Email:

I, the undersigned, apply and agree to become a Member of the Data Commons Cooperative (“**Cooperative**”) under the following terms.

1. I affirm my interest in the purposes of the Cooperative and that I qualify for membership as those qualifications have been explained to me.
2. I agree to become a Member of the Cooperative, and agree to abide by the articles of incorporation, bylaws, operating rules and other policies and directives of the cooperative, now and hereafter in effect, copies of which are posted on the website (<http://datacommons.find.coop>) and are available to me for review. I certify that I have tendered the required membership fee and dues, have purchased one Class A Voting Membership Share, and have fully read and signed this Membership Agreement.
3. I understand that, as a Member and holder of one Class A Voting Membership Share, I am entitled to one vote on any issue placed before the Cooperative's Members for a vote.
4. As required by federal tax law governing patronage distributions, I hereby certify that I have read Article XI of the Cooperative Bylaws, entitled “Consent to Patronage Distributions.” This means that I agree that patronage paid to me by the Cooperative is income to me, and I will pay the tax on it.
5. I understand and agree that:
 - By submitting data to the Cooperative for distribution, I understand that I am granting rights to the Cooperative and its users as stated in the Cooperative's rules and policies.
 - All labor and personal services provided by me (or my employees if I am an entity) to the Cooperative shall be either on a volunteer basis, if uncompensated, or on an independent contractor basis, if compensated. I understand and agree that I am not considered an employee of the Cooperative for any purposes, nor shall my relationship with the Cooperative be considered a joint venture or any other business form or arrangement. I understand and agree that I am not entitled to any employee benefits, such as health insurance, and that the Cooperative is not obligated to withhold estimated taxes or other sums from amounts payable to me. I understand

that it is my responsibility to file and pay all taxes, estimated taxes, unemployment insurance and any other mandated payments required under federal or state law.

6. I agree to promptly pay when due, and in the manner requested, all fees, charges, accounts or other amounts owed to the Cooperative. Failure to make such payments will result in my membership becoming inactive and all benefits being suspended. An inactive membership may be reactivated and benefits restored, at the Cooperative's option, by my submitting a signed, written request for this accompanied by full payment of all sums due.
7. I understand that either I or the Cooperative may, at any time, terminate my membership in the Cooperative and this Agreement by notifying the other party in writing of this intention no less than 10 days prior to the intended termination date. Until such notice, it is mutually agreed that membership shall continue from year to year. Termination or suspension of membership shall not relieve me of the obligation to pay any dues, assessments, accounts or other charges either accrued and due or past-due and unpaid. I agree that I will pay such amounts due in full upon my termination, or that such sums may be deducted from amounts due to me upon termination. I agree to continue to be bound by any applicable terms and conditions in the articles, the bylaws, the operating rules and this agreement.
8. A. If the Member is an organization and not an individual, the following person is authorized to vote the Class A Membership Share and act in all other respects for the entity with the Cooperative. This designation remains in effect for the full term of Membership unless revoked in writing.

Name:

B. The following person is designated as an alternate to vote the Class A Membership Share and act in all other respects if the individual named above is not available to vote or act. This designation remains in effect for the full term of Membership unless revoked in writing.

Name:

9. I agree to the terms of this Member Agreement as of the date written above. I understand that this Agreement is not binding on the Cooperative until accepted below.

Member Name (block letters)

Signature (authorized representative for organizations)
(electronic signature is acceptable)

Date

ACCEPTED:

Data Commons Cooperative

Date

by