FALL RIVER RURAL ELECTRIC COOPERATIVE
Where Service Matters

MEMBERSHIP UPDATE REQUEST AND AGREEMENT

The undersigned (herein called the Applicant) hereby applies for membership in, and agrees to purchase electric energy from FALL RIVER RURAL ELECTRIC COOPERATIVE, INC. (hereinafter called the "Cooperative") upon the following terms and conditions:

Terms and Conditions for adding a name to an account

1. Applicants will comply with and be bound by the provisions of the certificate of incorporation and bylaws of the Cooperative as well as such rules and regulations as may from time to time be adopted by the Cooperative.
2. Your signature on this application grants the Cooperative and its affiliates, to which Applicant may become a member, permission to contact you via phone or email in the event of emergencies, debt collection, information purposes or for any other business reason. Your signature also authorizes the Cooperative to process an energy risk assessment through a credit reporting agency to validate identity. *If a social security number is not provided, additional identification will be required prior to processing this request.
3. By becoming a member, applicant assumes no personal liability or responsibility for any debt or liabilities of the Cooperative, and it is expressly understood that under the law his/her private property cannot be attached for any such debts or liabilities.
4. All applicants agree that any Patronage Capital which has been earned in the past and which will be earned in the future will now be jointly owned.
5. All balances currently on the account and any future charges to be billed will be the responsibility of all applicants listed on this application.

Terms and Conditions to remove a name from an account

1. By signing, the member being removed understands and agrees that all Patronage Capital, security deposits, and interest earned jointly will now be solely owned by the remaining member(s) on the account(s).
2. Any balance(s) accrued, up through the date of this application, are jointly owed and does not relinquish any member from the responsibility of payment.

_____ _____
Date Member Number or Account Number

Will you be adding or removing a name? Adding ☐ Removing ☐

If removing, who's name will be removed? _____

_____ _____
Applicant Name (First, Middle Initial, Last) Co-Applicant Name (First, Middle Initial, Last)

_____ _____
Applicant Signature Co-Applicant Signature

_____ _____
Applicant Social Security #* Co-Applicant Social Security #*

_____ _____
Applicant Date of Birth (Mo/Day/Yr) Co-Applicant Date of Birth (Mo/Day/Yr)

_____ _____
Applicant Email Address Co-Applicant Email Address

Cell? Yes ☐ No ☐ Cell? Yes ☐ No ☐

_____ _____
Applicant Telephone Number Co-Applicant Telephone Number

Please return the completed form to 1150 N 3400 E Ashton, ID 83420 or e-mail to memberservices@fallriverelectric.com. Or drop off at any of our offices in Ashton, Driggs, or West Yellowstone. Feel free to contact one of our friendly Member Services representatives at (800) 632-5726 with any questions.