LOCAL FIRST MEMBERSHIP

Business eligibility

MEMBERSHIP APPLICATION

BUSINESS & CONTACT INFORMATION

1. Legal Business/Organization Name: _____DBA: _____

2. Primary Contact Name: _____ Phone: _____ Email: _____

3. Marketing Contact Name: _____ Phone: _____ Email: _____

4. Finance Contact Name: _____ Phone: _____ Email: _____

5. Physical Address: _____ City/State/Zip: _____

6. Mailing Address: _____ City/State/Zip: _____

7. Industry:

☐ Arts and Culture ☐ Business and Hospitality ☐ Farm and Ranch
☐ Food and Dining ☐ Health and Wellbeing ☐ Home and Living
☐ Government/Non-Profit ☐ Recreation and Education ☐ Shops and Stores
☐ Professional Services

8. Please select the programs you plan on participating in:

☐ Be Local Book ☐ Eat Local Celebration ☐ Noel Night
☐ Independents Week ☐ Member Meet-ups ☐ Localist Event Planning/Hosting

9. Board and Teams to join (select all that interest you):

☐ Serve as Board of Directors ☐ Governance ☐ Outreach & Mobilization
☐ Business Support ☐ Application Approval ☐ Advocacy & Economic Development
☐ General Volunteer

10. What other benefits are you hoping to gain from your Local First Membership?

11. How did you hear about us? _____

12. Payment method: Credit Card / Check

Next Step: Fill out the attached price sheet and eligibility questionnaire.

Once your application has been submitted, a staff member will contact you to learn more about your business.
You will also be directed to complete your business listing in our online directory.
Completed applications should be sent to: Local First P.O. Box 2058 Durango, CO 81302 | membership@local-first.org

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MEMBERSHIP & PROGRAM PRICING

Your membership supports Local First, so we can support you!

Calendar Year (January to December) – Prorated if eligible**

A. MEMBERSHIP OPTION	PRICE	CHECK TO ADD
Business Membership	**$150.00**	
Supporter Membership	**$150.00**	
Non Profit Membership	**$90.00**	
Additional Business (same owner) Business: _____	**$60.00**	
Localist Membership (Individual)	**$25.00**	
B. INDEPENDENTS WEEK and/or EAT LOCAL CELEBRATION*		
Independents Week Sidewalk Decal	Free (one)	
Eat Local Celebration Sidewalk Decal	Free (one)	
Extra Sidewalk Decal (I.W.)	$25.00	
Extra Decal (E.L.)	$25.00	
C. BE LOCAL BOOK* ***Pre-order now to assure your space!***		**2016-17**
Back of coupon photo page	$400.00	
Story page	$330.00	
Membership directory ad	$140.00	
1 coupon	$120.00	
2 coupons	$240.00	
3 coupons	$360.00	
*Must be a business member to participate in these campaigns	**MEMBERSHIP FEE (A)**	
**Please discuss prorating with staff	**NET TOTAL (B, C)**	
TODAY'S DATE: ____/____/_____	**TOTAL**	

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ELIGIBILITY QUESTIONNAIRE

LOCAL FIRST provides membership opportunities: for **locally-owned, independent businesses and organizations** (such as nonprofits), and **supporters** (non-independent businesses and nonprofits, plus individuals), in La Plata County.

The following questions are used to determine eligibility for a **Business Membership**, which requires La Plata County residency of owners as well as full autonomy and decision-making authority within their business.

If an applicant does not qualify for Local First **Business Membership**, then **Supporting Membership** will be assigned.

1. Is this business a privately held company (not publicly traded), or a Colorado non-profit organization?
☐ Yes ☐ No

Intent: Local First serves local owners who have autonomy to transform any and all aspects of their businesses to support local communities. Local managers of businesses that operate on a national/international scale are invited to join Local First as Supporting Members. Supporting Members receive all the benefits of regular members except promotion within the **Be Local Book** and the rest of our Local First campaigns.

2. Do the business owners or directors who have a controlling interest, totaling greater than 50% of the business ownership, live in La Plata County the majority of the year? ☐ Yes ☐ No

Intent: This question relates to whether or not the business owners or controlling board of directors who have responsibility for that financing reside in La Plata County. Our intent is to support business owners who are actively involved in our community.

Owner: _____ Ownership Percentage: ____% County of Residence: _____
Owner: _____ Ownership Percentage: ____% County of Residence: _____

If more owners please include below.

LOCAL FIRST MEMBERSHIP

Business eligibility

3. Is this business registered in the state of Colorado, with no corporate or national headquarters outside La Plata County? □ Yes □ No

Intent: Local First is an organization comprised of local residents and business owners.

4. Does this business have full autonomy to make independent decisions regarding purchasing, operations, and distribution, as well as the name and look of your business?
□ Yes □ No

Intent: Local First promotes reciprocity between local business owners and customers in order to strengthen the communities of La Plata County. By autonomy we mean the ability to choose local potatoes for French fries (rather than having to use what's shipped from a parent company), to change delivery methods to lessen environmental impacts, to re-organize the ownership or profit-sharing structure of the business, or to pursue any other idea that a local owner has to strengthen our community through their business.

5. Does this business pay all its marketing, rent and other business expenses (without assistance from, or payment to, a corporate headquarters?) □ Yes □ No

Intent: One of the advantages of locally owned, independent businesses is that they're unique and contribute to our region's unique character. Businesses that are part of national marketing cooperatives and use the same names, signs, and ads don't contribute in the same way to this sense of place.

The Local First membership committee will conduct a review of this application and respond to you shortly with a determination of Business Member eligibility. Of course, Supporter and Individual memberships do not have specific eligibility requirements and are approved upon payment.

I hereby certify that I have answered these questions truthfully and to the best of my knowledge.
Legal Business/Organization Name: _____
DBA: _____ Date: ___/___/_____
Your Name (Printed): _____Signature: _____

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