



Montana Cooperative Services Membership Agreements



_____ Full Membership Agreement (Check Here)

This Membership Agreement is made and entered into this _____ day of _____ 2015 between Montana Cooperative Services (MCS) and _____ School District.

That for good and valuable consideration of conditions set forth in the agreement MCS shall provide those programs and services which are determined to meet priority cooperative purchasing needs of our members for the period of July 1, 2015 and June 30, 2016. The annual dues are listed below and referenced on the MCS invoice mailed to your district under separate cover. Previously.

\$1.00/student Membership Dues - Maximum of \$1200.00

_____ Food Bid as part of Full Membership – (Check Here)

_____ Food Bid ***ONLY*** (Check Here) – Dues: \$100.00

Food Services of America will again have our bid for the 2015-16 year. FSA offers a credit of .25% to all schools that pay invoices within 7 days and another credit of .25% to schools that have an average drop size of \$1500.00 or more (This will be calculated each quarter). No changes have been made in the bid from last year.

Please calculate the minimum dollar amount of food you will purchase with this bid by multiplying last year's food purchases by .65 and entering the amount in the blank below. Sign and send to the address below. When MCS receives this agreement we will contact FSA and your food prices will be attached to our bid.

Buying commitment for 2015-16 school year is 65% of the cost of food for the year:

\$_____ (does NOT include wages)

Dated this _____ day of _____ 2015.

THEREFORE, IN WITNESS THEREOF, The parties hereto have executed this agreement the day and year above written.

School Authorized Representative

MCS Authorized Representative

*****Mail to: MCS, P.O.Box 1611, Helena, MT 59624, OR FAX to 406.449.0985*****

School Information

School Name: _____

Primary Contact Person: _____

Title: _____

Address: _____

Phone: _____ Fax: _____

Email: _____ Web Address: _____

NAME:

E-MAIL:

Superintendent: _____

District Clerk: _____

Technology Coordinator: _____

Food Service Director: _____

Montana Cooperative Services

Name - Montana Cooperative Services

Address – P.O. Box 1611, Helena MT 59624

Contact Name – Dave Puyear, Executive Director

Phone - 406-461-8050 **Fax** - 406-449-0985

Email – dpuyear@mrea-mt.org **Web Site** - www.mtcoop.org

Montana schools are NOT required to be MREA members to participate in these programs

*****Mail to: MCS, P.O. Box 1611, Helena MT 59624, or FAX to 406.449.0985*****