



Associate Member Agreement

To be filled out by principal shareholding members and applicants for Associate membership.
Note: a third party is required to witness each signature

Principal Member

Name of applicant for associate membership	Name of principal member	Modo member no.
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I acknowledge that the applicant resides at the same address as I, the principal member
I agree that if the applicant is accepted as an Associate member, any debts due and owing to Modos from the applicant will form a lien against my shares. Modos can place liens against my shares for debts due and owing from the applicant so long as the debts relate to use of Modos Vehicles that occurs prior to:

- o The applicant terminating his or her membership;
- o The applicant becoming a full, principal member.

Signature of principal member	Date
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Name of third party witness	Signature of witness
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Address of witness

Associate Member

I acknowledge that I live at the same address as the principal member.

I agree if I am accepted as an Associate member, any debts due and owing to Modo from my principal member partner will form a lien against my shares. Modo can place liens against my shares for debts due and owing from my principal member partner so long as the debts relate to use of a Modo Vehicle prior to:

- o Me becoming a full, principal member.

I recognize that if my principal member partner's membership is terminated or his or her carsharing privileges are suspended, my carsharing privileges will be suspended until such time as I become a full, principal member or the carsharing privileges are reinstated.

Signature of associate member	Date
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Name of third party witness	Signature of witness
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Address of witness

Please scan and e-mail to info@modo.coop

31/05/2018