



Member #: I _____
 o f f i c e u s e o n l y

**AFFORDABLE HOME
 IMPROVEMENT MATERIALS**

521 S 9th St., Milwaukee, WI 53204
 414.383.7792 fax 414.383.9397
 www.theCommunityWarehouse.org

**Individual Membership
 Application**

Date: _____

Name: _____

Current Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Email (I want to receive CW emails): _____

I understand that Community Warehouse is a charitable organization and that it assumes no responsibility or liability for any injury or damage to any person(s) or property that result from the use of any products purchased from it. I also understand that it assumes no responsibility for any omissions or errors regarding the products or their installation. Community Warehouse makes no other warranties or representations of any kind whatsoever expressed or implied. All implied warranties, including but not limited to warranty of merchantability and fitness for a particular purpose are hereby disclaimed.

- **I understand and agree that products purchased from Community Warehouse are for my personal use on my residential properties; they cannot be used for resale of any kind. I understand that Community Warehouse is a “credit or cash only” establishment and that all products are sold “as is” and all sales are final. Credit or debit cards used must match a name on the membership, as well as the members’ ID; I understand that Community Warehouse does not hold materials for any customer without full payment and materials must be picked up within 2 business days. For any items left past 2 days, I will forfeit my product and Community Warehouse will restock the items. Any leftover account balance after this membership expires will be used to renew and/or extend my membership.**

Signature _____

Date _____

Payment: \$_____ Csh / CR / Cpn ✓ID: _____
 Offered Bible: English / Spanish / Decline
 How did you hear about us? _____

 o f f i c e u s e o n l y

Sponsoring Org
 Membership # _____
 Entered in Quick Books (date) _____
 Entered on Member List (date) _____
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