



Please complete the following application in its entirety to be eligible for a New Leaf Community Markets, Inc. ECard charge account. New Leaf Community Markets, Inc. partners with Bank of America to process ACH transactions and will never disclose personally identifiable information to any other party. Your account will be charged upon submitting an order. We only accept bank checking information as a form of payment.

Once complete mail, fax, or email application to: **New Leaf Community Markets, Inc.**  
**Attn: Ecard Program**  
**1101 Pacific Avenue, Suite 333**  
**Santa Cruz, CA 95060**  
**F: 831.466.0925**  
**E: [Ecard@newleaf.com](mailto:Ecard@newleaf.com)**

SCHOOL NAME:

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SCHOOL TAX ID/EIN:

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### COORDINATOR INFORMATION

FIRST NAME:

LAST NAME:

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PHONE NUMBER:

EMAIL:

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FULL MAILING ADDRESS:

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### CHECKING ACCOUNT INFORMATION

ACCOUNT TYPE (CHECKING/SAVINGS):

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BANK NAME:

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NAME ON ACCOUNT:

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ACCOUNT NUMBER:

ROUTING/ABA NUMBER (9 DIGIT):

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Applicant has carefully reviewed this application and confirmed that all information is true and correct. Applicant agrees to pay e-transaction upon delivery of order. An email copy of receipt will be received upon charge of account. Applicant's signature indicates complete agreement to terms, and holds applicant responsible for any outstanding balances. Furthermore, applicant understands that failure to pay balance indicates delinquency, at which time the account will be closed permanently and collection procedures will follow.

**APPLICANT SIGNATURE:**

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**DATE:**

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