

Dick's Giving Back Rewards Program

In order to process your enrollment, all fields must be complete. Incomplete forms will not be processed.

Send the completed form to: **Email:** Karen.Caswell@dicksfoodmarket.com or **Fax:** 616-681-9080

Or **Mail** completed form to: Dick's Food Market, Attn: Karen Caswell, 1623 142nd Ave., Dorr, MI 49323

PAYMENT & GROUP REBATE PERCENTAGE | Checks will be mailed quarterly.

- 1% donated on purchases between \$40 - \$250 made by shopper in one month
- 2% donated on purchases between \$250.01 - \$500 made by shopper in one month
- 4% donated on purchases of \$500.01 or more made by shopper in one month

GROUP INFORMATION

Group Name _____ Phone Number _____

Street Address (no PO Boxes) _____

City _____ State _____ Zip _____

Group Federal Tax ID Number (9-digit TIN/EIN) _____

COORDINATOR INFORMATION

First & Last Name _____

Email _____ Phone _____

GROUP TYPE (choose one)

Private School (including parent group, foundation, booster, on campus sports league)

____ Pre-school ____ Elementary

____ Middle ____ High

Public School (including parent group, foundation, booster, on campus sports league)

____ Pre-school ____ Elementary

____ Middle ____ High

Other Non Profit

____ Community ____ Civic

____ Religious ____ Sports Organization