

## 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@spartannash.com or **Fax:** 616-681-9080

Or **Mail** completed form to: Dick's Food Market, Attn: Karen Caswell, 1623 142<sup>nd</sup> 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