

VIP Customer Rewards Club Enrollment Template

Please fill out this form to join our exclusive VIP Customer Rewards Club. Once completed, please print and return this form to any store representative.

Personal Information

First Name:

Last Name:

Date of Birth (MM/DD/YYYY):

Phone Number:

Email Address:

Mailing Address

Street Address:

City:

State / Province:

Zip / Postal Code:

Shopping Preferences

Favorite Product Category:

Referred By (Staff Name):

Authorization & Signature

By signing below, you agree to receive special VIP offers, newsletters, and rewards notifications.

Customer Signature (Write here):

Date: