

Place Card Number Sticker Here



Foodtown Club Card

Last Name

M. I.

Sex: M

F

First Name

Date of Birth:

(for security purposes)

Month

Day

Year

Street

Apt.

Town/City

State

Zip Code

Phone Number

Language preference: English

(check one box)

Spanish

Email Address

Your Signature _____ **Date** _____

** I understand that my purchase may be recorded and may be used by Foodtown or its service provider, The Sperry and Hutchinson Company, Inc. (S&H), for marketing purposes. I am aware that I may receive special offers and coupons from Foodtown or S&H. At no time will Foodtown or S&H ever rent or sell the Foodtown customer list to any third party.*

I do not wish to receive direct-mail coupons, special offers, or other information.

Place Card Number Sticker Here



Foodtown Club Card

<input type="text"/>										<input type="text"/>		Sex: M <input type="checkbox"/> F <input type="checkbox"/>							
Last Name										M. I.									
<input type="text"/>										Date of Birth: <input type="text"/>		<input type="text"/>							
First Name										<small>(for security purposes)</small> Month		Day							
<input type="text"/>										<input type="text"/>		<input type="text"/>							
Street										Apt.									
<input type="text"/>										<input type="text"/>		<input type="text"/>							
Town/City										State		Zip Code							
<input type="text"/>										<input type="text"/>		<input type="text"/>							
Phone Number										Language preference: English <input type="checkbox"/>		Spanish <input type="checkbox"/>							
										<small>(check one box)</small>									
<input type="text"/>																			
Email Address																			
Your Signature x _____										Date _____									

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