

# MERCHANT PARTICIPATION APPLICATION

Complete and return this form to the Address Below.  
Participate at no cost when selected.



## MY SCHOOL COUPONS SAVE 10 CARD FUNDRAISING PROGRAM

All participating merchants will provide a ten percent (10%) discount upon presentation of a valid School Coupons Save 10 Card or Save 10 Key Card. Any restrictions or other exclusions must be noted below. Expiration Date of cards is not more than one year from date of Card issue. All cards have barcoding that will be provided prior to release.

### 1. BUSINESS INFORMATION

This information will be used for correspondence only. Read and complete entire form. Retain PINK COPY for your records.

**BUSINESS NAME** \_\_\_\_\_

**CONTACT PERSON** \_\_\_\_\_

**MAILING ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**TELEPHONE** \_\_\_\_\_ **FACSIMILE** \_\_\_\_\_

**EMAIL** \_\_\_\_\_

You will be notified of placement in upcoming programs (Regional or National Participating Merchants.)

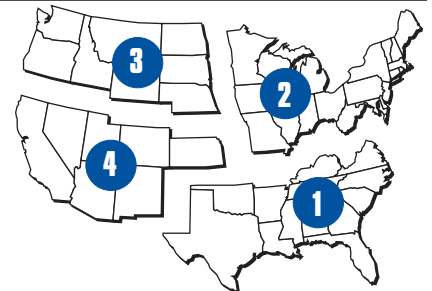
### 2. PLACEMENT INFORMATION

This information will be used for participation listing and placement.

All selected merchants will be listed in My School Coupons national/regional/or area databases, and may also be included in other fundraising programs at no charge, based upon the placement and offer criteria provided.

Placement is determined by a number of factors. You will increase your chances of placement on the Card by making additional donations to this program. Guaranteed Card Placement is available in the My School Coupons Program. (Please consult the latest Rate Card for placement fees.)

**GUARANTEE CARD PLACEMENT IN ALL APPLICABLE PROGRAMS**  
Guaranteed Placement fees will be billed upon publication, at a rate of \$\_\_\_\_\_ per 1,000.



My School Coupons Listing Regions

**OFFER VALID AT**  **ALL PARTICIPATING NATIONWIDE LOCATIONS** OR  **REGIONS** \_\_\_\_\_ **OR** \_\_\_\_\_  
(Enter all Regional Areas That Apply - See Map)

**THIS AREA LOCATION(S) ONLY** \_\_\_\_\_

**LOCATION ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**TELEPHONE** \_\_\_\_\_

If your business has multiple participating locations, please provide a separate typed list of all locations and addresses.

#### DETAILED DESCRIPTION OF ANY RESTRICTIONS OR EXCLUSIONS, AND EXPLANATION

Please limit restrictions and exclusions. These will not appear on card.

\_\_\_\_\_

\_\_\_\_\_

**THIS OFFER IS**  **EVERYDAY VALUE**  **BOTH**

Will only appear on Discount Cards May appear in Books and on Cards

**BE A STAR!** This Program relies on the generosity and support of businesses like yours to enable us to recognize the efforts of participating principals, teachers, volunteers, and students. Contributions made in support of this program assist in the fulfillment of these incentives. Your business will receive additional recognition of your support on the Card and in other Campaign material. You will increase your chances of placement on the Card by making additional donations to this program.

**YES, I WANT TO BE A STAR!** Please accept my donation in the following amount:  
\_\_\_\_\_ Number of Gift Cards totalling \$\_\_\_\_\_, or cash fee of (check one):  \$500  \$250  other: \$ \_\_\_\_\_

**YES, I'LL HELP SELL!** my business will sell cards AFTER the campaign to help support student incentive programs.

This application submitted \_\_\_\_\_ (date) by \_\_\_\_\_  
Your name - Please Print.

\_\_\_\_\_  
Authorized Merchant Signature (officially approved by) Title

If selected for program inclusion, Merchant agrees to honor all cards when presented and to be bound by the terms of the Merchant Participation Agreement incorporated by reference, and acknowledges receipt of same.

MAIL TO: Feredonna Communications • Drawer 23010, Knoxville, TN 37933 OR FAX TO: (866) 626-0335 (Toll Free)  
FOR INFORMATION, CONTACT: Feredonna Communications (800) 626-0335

FOR SCHOOL COUPONS USE ONLY  
DATA CODE \_\_\_\_\_