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DUTCHWAY REWARDS CARD APPLICATION Please print clearly

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New ID #	Linking ID #
Applicant's Last Name	
First Name	Middle Initial
Address	
City	State () -
ZIP Code	Phone Number*
Email Address	
Senior Discount	*If you forget your Rewards Card, just give us this phone number at the registe
Employee Discount	to get all the card benefits!
Privacy Policy: At no time will yor shared in any way with a 3 rd p	your personal information be leased, sold, party.
	nember you are entitled to receive special you do not wish to receive these exclusive