

**MAIL IN YOUR FORM TODAY!
REGISTER FOR
SHAW'S RECEIPT REWARDS!**

**SHAW'S RECEIPT REWARDS REGISTRATION FORM
FOR NON-PROFIT ORGANIZATIONS**

Name of Organization _____

Street Address _____

City _____

State _____ ZIP _____

Telephone _____

Fax _____

Federal Tax Exempt ID# _____
(Attach a copy of your Federal Tax Exemption Certificate)

Contact Person

Name _____

Title _____

Signature _____

Mail completed application and Federal Tax Exemption Certificate to Shaw's Receipt Rewards Program, P.O. Box 600, East Bridgewater, MA 02333. We reserve the right to review and/or deny any organization from participating. We reserve the right to discontinue or modify this program with 30 days notice.



STAR MARKET STORES IN MASSACHUSETTS