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Bears Against MS Customer Rewards Program Application

I am interested in joining the **Bears Against MS Customer Rewards Program**. I have read the fine (paw) print (on the Bears Against MS website) and I understand the benefits, terms and conditions of the program. Please accept my application below. This application provides my consent to be added to the **Bears Against MS** e-newsletter mailing list.

(Please type or print) Name:	Date:
Address:	Date.
	State: Zip:
City:	State:Zip:Time Zone:Noon in Florida =
Country:	Best time to call:
Telephone: () - Email:	Best time to can:
	Appivorgany / / [with the feel
Birthday: / [month/day/year (yr. optional)]	Anniversary: / / [mth/day/yr]
Interested in: Charlie Bears Isabelle Collection Other Bear Interests:	☐ Minimo Collection (check all that apply)
Other (non-bear) Interests:	
	d" <i>Bears Against MS</i> on FB: Yes No
I'm an existing BAMS Customer: Yes No If "N	No", referred by:
Anything else you'd like us to know about you that we collecting experience:	ill help us provide you with a better bear
Please email completed application to: <u>valerie@bearsagainstms.com</u> and put " BAMS Customer Rewards Program Application " in the subject line. If you prefer to send the form by snail mail, please email us and we'll provide a mailing address. Thank you.	
For Bears Against MS Use Only:Date Approved:Membership #:Cut	b Status: Bruin Status:
Paws Earned:	
Birthday Friends and Family:	
Notes:	
Welcome: Email: B/D & Ann: Accounting: Mail Chimp:	