TOPS BONUSCARD® SAVINGS APPLICATION

Sign Up Today For Your Free BONUSCARD® And Start Saving More!

After you have completed this form, return it to your nearest Tops Customer Service Center. **Please PRINT all information.**

☐ Check box if you are updating information on existing Bonuscard#_____

☐ Ms. ☐ Miss ☐ Mrs. ☐ Mr.

Last Name: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ First Name: ☐☐☐☐☐☐☐☐☐☐☐☐ Middle Initial: ☐

Street Address: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Apt. #: ☐☐

City: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ State: ☐☐ Zip: ☐☐☐☐☐☐

Phone: ☐☐☐-☐☐☐-☐☐☐☐ E-Mail Address: _____

Customer Signature: _____ ☐ Check box if you do NOT want to receive mailings.

Approved by:_____ Date:_____ Store:_____

Privacy Pledge: Our customers' privacy is of the utmost importance to us. Tops Markets, LLC will not sell, rent or relinquish customer names, home or e-mail addresses, phone numbers, social security numbers or any other customer identifiable information to anyone. Personal transaction data will be used only for promotional programs provided to you which are sponsored or co-sponsored by Tops or its affiliates. We will not use this information for any other purpose.

PLACE BONUSCARD®# STICKER HERE

Form #98995