



SERVICING

AMERICA'S FUND-RAISING NEEDS

6356 Foster Drive

Riverside, CA 92506

Phone 1-888-285-0869 • Fax (951) 779-9083

SCHOLARS DISCOUNT CARD

Participation Merchant Agreement

DATE: _____ **ORGANIZATION:** _____
EXPIRATION DATE: _____

The following company agrees to honor the discount stated below. The cards are good for one use per day. Offers on the card are not good with any other offer, promotion or discount. The discounts are only good at the locations written on this agreement. Merchant cannot revoke said offer until the cards expiration date. Merchants shall receive two free complimentary discount cards for their contribution.

BUSINESS NAME/GO CKN: _____

ADDRESS: _____

CITY: _____ **ZIP:** _____

PHONE: _____ **FAX:** _____

OFFER: _____

SIGNED BY: _____ **PRINT NAME:** _____

TITLE: _____

IF YOU HAVE ANY QUESTIONS OR COMMENTS, PLEASE VISIT OUR WEBSITE AT

WWW.SCHOLARS-DISCOUNT-CARD.COM, OR EMAIL US AT SDCARD@ATT.NET.