



The Hoffen Foundation is happy to announce that we have joined up in the Tom Thumb Grocery Store's Good Neighbor Program. In addition to using the card for great savings, and to gain American Advantage Miles from American Airlines, you can now designate funds to help the Hoffen Foundation.

The program allows up to 1% of your grocery bill to go to the Hoffen Foundation to support children's charities, donated by Tom Thumb.

All you have to do is fill out and return the attached Reward Application to the Customer Service Counter at your nearest Tom Thumb grocery store.

We have already supplied the required code, so please fill out and detach the application.

This application will work for you to update or apply for a new card.



TOM THUMB REWARD CARD APPLICATION

PLEASE COMPLETE AND SIGN THIS APPLICATION FOR YOUR TOM THUMB REWARD CARD. PRINT CLEARLY IN BLACK OR BLUE INK.

NEW CARD APPLICATION

- New Member
- New Member with Tom Thumb SMARTCHECK (please complete Sections 1 and 2)

INTERNAL USE
Place Card #
Sticker Here

CHANGES TO EXISTING CARD ACCOUNT

____ - ____ - ____

Existing Card Number (required)

- Replacement Card (please complete Section 1)
- Name/Address/Phone Update (please complete Section 1)
- Add Tom Thumb SMARTCHECK (please complete Sections 1 and 2)
- Bank or Driver's License Change Information for Tom Thumb SMARTCHECK Member (please tape a new voided check below, and complete Sections 1 and 2)

- Add American Airlines AAdvantage® Account Number (please complete Section 1)

Other _____

- Link cards, members of your household or a new card to an existing card number (used to maintain participation in promotions and other programs)

▶ Existing Card Number (required) _____ New Card Number to Link (required) _____

TOM THUMB PAYROLL CHECK CASHING INSTRUCTIONS

Complete Section 1. *Required information
Must present Check and current Driver's License or State I.D. Card
Must be at least 18 years of age

Your Employer/Pension Provider*
____ - ____ - ____
Employer's Phone*
____ - ____ - ____
Social Security Number*

Driver's License Number or State I.D. Number* State Issued*

Internal Use Only
LIMIT REQUESTED Payroll \$ _____

1

TOM THUMB REWARD CARD

Must be at least 18 years of age
Incomplete information may result in loss of sweepstakes prize or other offers
*Required Information

Last Name* First Name* M.I.

Street Address* Apt#

City State Zip Code* - ____
____ - ____ - ____
Birthdate (month/day/year) E-Mail Address
____ - ____ - ____
Home Phone

Airline Account Number

◀ If you forget to bring your Tom Thumb Reward Card with you, we can link your card to your phone number.

To earn miles include your American Airlines AAdvantage® Account Number

TOM THUMB REWARD CARD CUSTOMER AGREEMENT STATEMENT

We respect your privacy. Tom Thumb does not sell or lease personally identifying information (i.e., your name, address, telephone number, and bank and credit card account numbers) to non-affiliated companies or entities. We do record information regarding the purchases made with your Tom Thumb Reward Card to help us provide you with special offers and other information. Tom Thumb also may use this information to provide you with personally tailored coupons, offers or other information that may be provided to Tom Thumb by other companies. If you do not wish to receive personally tailored coupons, offers or other information, please check the box below. Must be at least 18 years of age.

- Check this box only if you DO NOT wish to receive personally tailored coupons or offers from Tom Thumb. By checking this box, you will not be eligible to receive any special offers for which you might otherwise qualify for through your use of your Tom Thumb Reward Card.

Applicant's Signature (must be signed to be valid) Date

2

TOM THUMB SMARTCHECK™ INSTRUCTIONS

Must be at least 18 years of age

To obtain Tom Thumb SMARTCHECK, you must tape your current pre-printed, VOIDED check to this application. This check will identify the checking account from and to which electronic payments and/or refunds will be made. Upon approval, you will receive a letter in the mail notifying you when your Card is ready for Tom Thumb SMARTCHECK activation. Bring in your confirmation letter and your Driver's License or State I.D. Card to select your Personal Identification Number (PIN) and activate Tom Thumb SMARTCHECK.

- To pay for groceries using Tom Thumb SMARTCHECK, you MUST use your Reward Card at checkout.
- Phone number will not activate Tom Thumb SMARTCHECK.
- Allow four to six weeks for application processing. One Card per customer.

IMPORTANT NOTE:
Please Tape VOIDED check to application.
DO NOT submit a Deposit Slip.

A complete updated form is required for any future bank account and/or routing changes. Returned checks, along with the returned check or electronic fund transfer fees, may be electronically presented to your bank.

Driver's License Number or State I.D. Number State Issued
____ - ____ - ____
Home Phone Social Security Number

Tom Thumb Reward Card and your personal checking account in one convenient Card!

TOM THUMB SMARTCHECK™ CUSTOMER AGREEMENT STATEMENT

By signing this application/agreement and later using (or authorizing another person to use) my Tom Thumb Reward Card at Tom Thumb retail stores, I agree to be obligated by the terms and conditions as set forth in the agreement which will be issued upon approval of this application. I authorize Tom Thumb, its affiliates and subsidiaries to electronically debit the checking account identified here, or if appropriate, to credit that account, to pay for purchases made and/or cash received using Tom Thumb SMARTCHECK and my Tom Thumb Reward Card. I understand that the origination of such transactions from my account must comply with the provisions of U.S. law. The authorization to complete transactions hereunder will remain in full force and effect until Tom Thumb receives written notification from me of its termination in such time and manner as to afford it and my bank a reasonable opportunity to act on it. I hereby represent and warrant that I have authority to make withdrawals from, and to otherwise bind, this checking account. In the event my bank denies and returns any electronic check to Tom Thumb, I authorize Tom Thumb to electronically re-present my check for both the electronic check amount AND any returned check fee or electronic fund transfer fee as allowed by state law.

Applicant's Signature (must be signed to be valid) Date



Good Neighbor Program

DALLAS

Complete this form to link your Reward Card to the charity of your choice. You can choose to link up to three charities. Contact your charity of choice and ask if they are a member of our Good Neighbor Program or ask the Courtesy Booth for the GNP number of a particular charity. To learn about the Good Neighbor Program, go to www.tomthumb.com.

REWARD CARD NUMBER:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Don't know your card number? Call Customer Care at 1-877-723-3929.

Charity to be added to your card:

1. Charity # **10858** _____
2. Charity # _____
3. Charity # _____

Charity to be deleted from your card:

1. Charity # _____
2. Charity # _____
3. Charity # _____

APPLICANT NAME (PLEASE PRINT)

PHONE

APPLICANT SIGNATURE

DATE

PLEASE RETURN THIS FORM TO YOUR NEIGHBORHOOD TOM THUMB COURTESY BOOTH

OFFICE USE ONLY: STORE # _____

COURTESY BOOTH: SEND THIS COMPLETED FORM TO THE MAILROOM - ATTN: DATA CENTER OF ARIZONA