



EMPLOYEE DISCOUNT REWARD PROGRAM

REGISTRATION FORM

NEW UPDATE

Please Print Clearly

Employee Name _____ Date of Hire _____

Street Address _____

City _____ Zip _____ Status: Full Time Part Time

Store _____ Dept. _____ Email _____

Primary Shopper Price Plus Card # _____

Primary Shopper Phone # _____ Secondary Shopper Phone # _____

****All household members MUST use numbers listed above for Employee Rewards purchases.***

Household Members (name)

Relationship

1. _____

2. _____

3. _____

4. _____

****Future Updates - Any new phone number(s) or change(s) in household members must complete updated form and send to Main Office.***

Rules:

- Employees will be eligible for the reward program after 90 days of employment.
- Employees must be employed at date of issuance in order to receive the reward.
- Employment Status must be “active” to receive reward.
- The reward will be equal to 5% of the prior quarter qualified purchases* from Gerrity’s Supermarkets up to pre-established ceiling targets based on \$50 per week in spending per household member (4 for full-time; 2 for part-time employees).
- To participate, an employee must have a Price Plus account and must complete a rewards registration form.
- The program is non-transferable: Friends, extended family and those not living in an employee’s household are not eligible to receive the reward or contribute purchases. Abuse of this policy will be considered reward theft and will result in disciplinary action up to and including termination.
- The reward will expire if not used within 30 days from date of issuance.

****Exclusions:***

- Milk, cigarettes, lottery tickets, alcohol and other items prohibited by law are excluded.

Employee acknowledgment:

I request participation in the Gerrity’s Employee Reward Program. I understand the program rules and will comply.

(signature)

(date)

Store manager review:

To the best of my knowledge, the above information is accurate and correct.

(signature)

(date)