



GROCERY CARD PROGRAM POWER REGISTRATION LOG

Grocery card program name _____

Register your card and start earning for _____
(Group Name)

To register your grocery card, complete the information below. Use the card every time you shop and our group earns!

It's Free. It's Easy. Sign Up Today!

www.escrip.com

To register your card, please complete all fields.

Your Name	Your Email	Your Phone Number	Your Zip Code	Grocer Name	Your Grocery Club Card Number																		
Susan Supporter	ssupporter@email.com	800-555-1212	12345	eScrip Grocer	1	2	3	4	5	6	7	8	9	0	1	2	3	4	5	6	7	8	9

*Certain merchants may have specific "group type" requirements in order to qualify for contributions. Visit www.escrip.com and go to Merchant Search for specific merchant details.

Attention Fundraising Coordinator!

Use this form to collect supporter card information that you will enter into Power Registration. Information collected must be entered by the coordinator or group volunteer (eScrip does not process supporter card registrations). To access Power Registration, visit your eScrip group home page at groups.escrip.com. Thank you!