



ENROLLMENT FORM



By completing this form, you are joining the original, largest electronic fundraising program, eScrip. Participating merchants contribute each time you make a purchase using your free grocery loyalty card or debit and credit cards – that are registered with eScrip. There are no receipts to collect, no vouchers or certificates to buy, no hassles for you – and every purchase counts! Please help support **Maricopa Nursing at Banner Boswell Nursing Education Center, Honoring Ruth Hoover, RN.**

When your card is registered, our nursing education program can receive a rebate of 1 – 3% of your purchases (based on the amount of money spent).

We would be glad register your qualifying cards. Please fill in the following information and return this form to Sun Health Foundation at P.O. Box 2015, Sun City, AZ 85372-2015.

Last Name*		First Name*
Address*		
City*	State*	Zip Code*
Email Address		Phone Number

* Denotes Required Information. eScrip has made a firm commitment to protect customer information.

You must register at least one card to join the program

CARD TYPE	CARD NUMBER

Grocery Club Card Type: Safeway, Pavilions, Vons, Genuardi's, PW, Adams, Carrs, Dominick's
Debit/Credit Card Type: Macy's, MasterCard, VISA, American Express, Discover, Debit Cards

Or you can register online at www.escrip.com to sign up today! Allow one week processing.

- Group Name: **Boswell Mesa Nursing Education Program**
- eScrip Group ID: **150239837**

Questions? Please email foundtri@sunhealth.org or call **623/876-5330**. Detailed information on the eScrip program can be found at www.eScrip.com or by calling Sun Health Foundation **623/876-5330**. Sun Health Foundation will automatically renew your enrollment as needed unless you request otherwise.