# BUY 15, GET $30
## Frequent Buyer Rewards Program

## HOW IT WORKS:

• Clip and save proofs of purchase from participating Triple Crown® products— Triple Crown manufactured feeds, Safe Starch® and StressFree® forage, Golden Ground Flax, Timothy Balance® Cubes and Rice Bran. Oats and non-fortified forages and cubes do not qualify.

• Once 15 proofs are saved, send proofs and completed submission sheet or Frequent Buyer envelope to:

> **Triple Crown Nutrition**
> **P.O. Box 220**
> **Mohnton, PA 19540**

• Please allow up to 8 weeks for processing.

## RULES/REGULATIONS:

• Must submit proof of purchases, receipts will not be accepted.

• Limit of 12 $30 debit cards ($360 value) per customer, per calendar year.

• If submitting more than 15 proofs, they must be bundled in groups of 15. Proofs are counted in increments of 15; incomplete groupings will not be counted or returned.

• Keep track of your submissions. Proofs submitted that exceed the yearly maximum redemption allowed (180 proofs) will not be returned.

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REWARDS CARD

**TRIPLE CROWN**

4000 1234 5678 9010

Valid only in the United States

VALID THRU 00/00

**DEBIT**

U.S. BANK REWARDS

**VISA**

PROOF OF PURCHASE: EXAMPLE

*We hope this program supports your equine endeavors, whether it helps cover show entries, new tack, rehabbing a horse, training, traveling expenses, or feed. We strive to support our customers in their goals for their horses' health and performance. Thank you for choosing Triple Crown.*

Please send completed form and proofs to: **Triple Crown Nutrition, P.O. Box 220, Mohnton, PA 19540**

**Customer Name:** _____

**Address:** _____

**Email:** _____     **Phone:** _____

**# of Proofs Enclosed:** _____

## 2024 Triple Crown Rewards Submission Tracker
*Clip off and retain for your records*

1. Date Mailed: _____    # of proofs sent: _____
2. Date Mailed: _____    # of proofs sent: _____
3. Date Mailed: _____    # of proofs sent: _____
4. Date Mailed: _____    # of proofs sent: _____
5. Date Mailed: _____    # of proofs sent: _____
6. Date Mailed: _____    # of proofs sent: _____
7. Date Mailed: _____    # of proofs sent: _____
8. Date Mailed: _____    # of proofs sent: _____

9. Date Mailed: _____    # of proofs sent: _____
10. Date Mailed: _____    # of proofs sent: _____
11. Date Mailed: _____    # of proofs sent: _____
12. Date Mailed: _____    # of proofs sent: _____