



**This form is to be used for linking members' MVP cards.
Return to your organization's LionShop & Share Coordinator.**

Customer Sign Up:

MVP Card # (12 digits) _ _ _ _ _
First Name _____ MI ____
Last Name _____
Street Address _____
City _____ State ____ Zip _____
Day phone () _____
Email address _____
List name and address of charity you wish to support

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