

# RANDALLS REMARKABLE CARD APPLICATION

PLEASE COMPLETE AND SIGN THIS APPLICATION. PRINT CLEARLY IN BLACK OR BLUE INK.

## NEW CARD APPLICATION

- New Member  
*(please complete Section 1 only)*
- New Member with  
Randalls SMARTCHECK  
*(please complete Sections 1 and 2)*

INTERNAL USE  
Place Card #  
Sticker Here

## CHANGES TO EXISTING CARD ACCOUNT

\_\_\_\_\_

Existing Remarkable Card Number *(required)*

- Replacement Card *(please complete Section 1)*
- Name/Address/Phone Update *(please complete Section 1)*
- Add Randalls SMARTCHECK *(please complete Sections 1 and 2)*

- Bank or Driver's License Change Information  
for Randalls SMARTCHECK Account  
*(please tape a new voided check, and complete Sections 1 and 2)*
- Other \_\_\_\_\_

- Link cards, members of your household or a new card to an existing Remarkable Card number  
*(used to maintain participation in promotions and other programs)*
- Existing Remarkable Card Number *(required)*  
\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_
- New Remarkable Card Number to Link *(required)*  
\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

TAPE CHECK HERE



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## RANDALLS REMARKABLE CARD

*Must be at least 18 years of age  
Incomplete information may result in loss of sweepstakes prize or other offers  
\*Required Information*

\_\_\_\_\_ Last Name\* \_\_\_\_\_ First Name\* \_\_\_\_\_ M.I.

\_\_\_\_\_ Street Address\* \_\_\_\_\_ Apt#

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code\* \_\_\_\_\_

\_\_\_\_\_ Birthdate (month/day/year) \_\_\_\_\_ E-Mail Address \_\_\_\_\_

\_\_\_\_\_ Home Phone \_\_\_\_\_

◀ If you forget to bring your Randalls Remarkable Card with you, we can link your card to your phone number.

## RANDALLS REMARKABLE CARD CUSTOMER AGREEMENT STATEMENT

We respect your privacy. Randalls does not sell, lease or provide personal information (i.e., your name, address, telephone number, and bank and credit card account numbers) to non-related companies or entities. We do record information regarding the purchases made with your Randalls Remarkable Card to send you special offers, personally tailored coupons, and other information, provided that you give us complete and accurate information on this application. If you DO NOT wish to receive special offers, coupons, or other information, please check the box below. However, if you check this box, you will not be eligible to receive any special programs or offers for which you might otherwise qualify through your use of your Randalls Remarkable Card.

- Check this box only if you DO NOT wish to receive personally tailored coupons or offers from Randalls. By checking this box, you will not be eligible to receive any special offers for which you might otherwise qualify for through your use of your Randalls Remarkable Card.

Applicant's Signature *(must be signed to be valid)*

Date

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## SMARTCHECK™ INSTRUCTIONS

*Must be at least 18 years of age*

To obtain Randalls SMARTCHECK, you must tape your current pre-printed, VOIDED check to this application. This check will identify the checking account from and to which electronic payments and/or refunds will be made. Upon approval, you will receive a letter in the mail notifying you when your Card is ready for Randalls SMARTCHECK activation.

- To pay for groceries using Randalls SMARTCHECK, you MUST use your Remarkable Card at checkout.
- Phone number will not activate Randalls SMARTCHECK.
- Allow four to six weeks for application processing. One Card per customer.

**IMPORTANT NOTE:**  
Please Tape VOIDED check. DO NOT submit a Deposit Slip.

A complete updated form is required for any future bank account and/or routing changes. Returned checks, along with the returned check or electronic fund transfer fees, may be electronically presented to your bank.



Now, link your Randalls Remarkable Card and your personal checking account in one convenient Card!

\_\_\_\_\_ Driver's License Number or State I.D. Number \_\_\_\_\_ State Issued

\_\_\_\_\_ Home Phone \_\_\_\_\_ Social Security Number \_\_\_\_\_

## SMARTCHECK™

## CUSTOMER AGREEMENT STATEMENT

By signing this application/agreement and later using (or authorizing another person to use) my Randalls Remarkable Card at Randalls retail stores, I agree to be obligated by the terms and conditions set forth in the agreement which will be issued upon approval of this application. I authorize Randalls, its affiliates and subsidiaries to electronically debit the checking account identified here or, if appropriate, to credit that account to pay for all purchases made and all cash received using Randalls SMARTCHECK and my Randalls Remarkable Card. I understand that the origination of such transactions from my account must comply with the provisions of U.S. law. The authorization to complete transactions hereunder will remain in full force and effect until Randalls receives written notification from me of its termination in such time and manner as to afford it and my bank a reasonable opportunity to act on it. I hereby represent and warrant that I have authority to make withdrawals from, and to otherwise bind, this checking account. In the event my bank denies and returns any electronic check to Randalls, I authorize Randalls to electronically re-present my check for both the electronic check amount AND any returned check fee and electronic fund transfer fee allowed by state law.

Applicant's Signature *(must be signed to be valid)*

Date