

Sign up for your
REWARDS card
and start saving.



It pays to shop here.

Guardian
TM

REWARDS Card Program
and Enrollment Form

Introducing a thank you.

Your business is important to us and as part of our appreciation we are pleased to offer you REWARDS. REWARDS is our loyalty program that offers you more when you shop with us. Card holders earn points on each purchase that can be applied to discounts on future purchases.

REWARDS provides you 10 points on every pre-tax dollar you spend in our store. In addition, customer appreciation events will also offer extra REWARDS points throughout the year to get you to your REWARDS faster. Once you earn 5,000 points you are eligible to redeem your first reward.

JOIN: Complete this form and deliver it to any employee at this store. You can start collecting on your next visit.

COLLECT: With each purchase, present your REWARDS card and your update will appear instantly on your receipt.

REWARD YOURSELF: When it's time to redeem your points – we'll ask you at the time of purchase. To earn REWARDS for a transaction in-store, your REWARDS card must be presented at the checkout.

How do I know how many points I have?

Your REWARDS points balance is shown on your receipt after each purchase.

How do I redeem my REWARDS points?

Once you have reached the minimum reward level of 5,000 points the cashier will ask you if you want to redeem your points. If you choose yes, the accumulated qualifying points will be converted to dollars and applied to your total, reducing the final cost. If you choose not to redeem at that time, you can keep collecting to receive larger discounts – up to 100% off your purchase!

Can each member of my family collect REWARDS towards one account?

Yes. REWARDS loyalty cards can be linked to one primary account so you and your family can collect together and reward yourselves faster.

Terms & Conditions

- 1) Rewards is owned and operated by each participating Guardian Pharmacy and is specific to the store named on the card itself.
- 2) Each licensed owner/operator has the right to revoke card privileges at any time at their discretion.
- 3) REWARDS card holders may earn REWARDS points on any qualifying purchase as determined by each owner/operator. Some exclusions apply. See store for complete details.
- 4) Each participating Guardian Pharmacy will maintain the privacy of the cardholder's information in the administration and communication of the program. Visit www.rexall.ca for our company privacy commitment.
- 5) REWARDS Points are only redeemable at the specific location indicated on the affixed card.
- 6) REWARDS Points are issued on pre-tax purchases only.
- 7) Participating Guardian Pharmacies reserve the right to change the terms and conditions at their sole discretion.

Exclusions: Some exclusions apply. Exclusions may vary from province to province. Please visit www.rexall.ca for a full list of exclusions in your province.

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Coulter's Pharmacy

1709 Dundas Street, London, ON N5W 3E1

519-451-0750



REWARDS Card Program and Enrollment Form

PLEASE COMPLETE THIS ENROLLMENT FORM AND PRESENT IT TO ANY EMPLOYEE AT THIS PARTICIPATING GUARDIAN PHARMACY INDICATED ON THE ATTACHED CARD.

Please select one only:

I am a new applicant I am changing my personal information

I am requesting a replacement card

My old card number is (if known): _____

Do you have a charge account with us?

My charge account number is (if known): _____

Please select one: Miss Ms. Mrs. Mr. Dr.

Please select gender: Male Female

First Name: _____ Middle Initials: _____

Last Name: _____ Date of Birth: _____

YYYY/MM/DD

Address: _____ Apt. #: _____

City/Town: _____ Prov.: _____ Postal Code: _____

Home Telephone: _____ Business Telephone: _____

E-Mail Address: _____

Do you have any children living in your household? Yes No

All information provided by you and any information that we gather as a result of your purchases is kept in the strictest confidence. **The information which you supply or which we gather will not be sold, given or supplied to anyone outside the Drug Trading Company Ltd.** By signing this Enrollment Form you signify your acceptance of the terms and conditions of the Guardian Rewards Program.

Would you like us to contact you for future offers etc.?

Customer's Signature: _____ Date: _____

YYYY/MM/DD





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