



PASSPORT TO REWARDS REGISTRATION FORM

If you are having trouble enrolling on-line, please complete the form below and email to: www.ruskpassport@yeck.com or fax to 937-294-6985.

If you have any questions regarding the program, please call us at 1-855-274-8395, Monday-Friday 9:00am to 5:00pm EST.

* = Required Field

SALON INFORMATION

Salon Name*: _____

Salon Contact*: _____

Address*: _____

City*: _____ State/Prov*: _____

Zip*: _____ Country*: _____

Phone*: _____

Email address*: _____

DISTRIBUTOR INFORMATION

Loyalty Card/Account Number*: _____

Distributor*: _____

Distributor Sales Consultant: _____

DSC Phone Number: _____

As a Rusk® Passport Salon, I agree to abide by the rules and guidelines of the program. I realize that I must maintain a minimum of \$3,000 dollars a year/\$750 quarterly in Rusk® purchases to stay active in the program. I authorize my distributor to provide this program with my sales on a quarterly basis.

Check box to confirm understanding:

Signature: _____

Date: _____