

Student of the Month Sign-Up Form

Please print.

School Name			
	Phone		
Name of School Principal			
School Address			
City	State	Zip	
Email Address			
Number of classrooms participating			
Please indicate which Dave's location you \square Agawam \square Hadley \square Ludlow \square No	, , ,	•	
IMPORTANT: Photocopies of a Please contact us if you no		· · · · · · · · · · · · · · · · · · ·	ores.
EACH CLAS	SSROOM WILL RECE	IVE:	
(1) Wall Poster, Up to (10) Certifica	ates of Achievement, Up to	o (10) Betta Fish Coupons	3
	EASE MAIL TO:		

Dave's Soda & Pet City
Student of the Month Program
151 Springfield Street, Agawam, MA 01001

TO EMAIL YOUR SIGN-UP INFORMATION:

Please email marketing@davespetcity.com and include "Student of the Month" in the subject line. If you have any questions, please call 413-789-2259 or email marketing@davespetcity.com