



# “GOOD NEIGHBORS” PROGRAM

## Non-Profit Organization Registration Form

### ORGANIZATION INFORMATION

**Organization Name:**

**Business Address:**

**City:**

**State:**

**Zip:**

**Phone:**

**Fax:**

**E-mail Address:**

**Checks to be made out:**

**Special Instructions:**

**Contact Person:**

**Title:**

### ABOUT “GOOD NEIGHBORS”

Fischer Flowers “Good Neighbors” Program is intended to financially assist worthy non-profit organizations. Fischer Flowers will donate two dollars each time a legitimate order is placed and an organization is selected as beneficiary. This program is only valid online.

Only certified non-profit organizations are eligible to enroll in this program. All applicants will be verified for authenticity. Fischer Flowers reserves the right to reject any applicant it deems inappropriate for this program.

Absolutely no commitment or obligation is required of the organization receiving the donated funds. However, if the organization ceases operations or changes its non-profit status, it must immediately notify Fischer Flowers in writing and its program eligibility will be terminated.

Fischer Flowers reserves the right to change or terminate this program at any time without notice.

### SIGNATURE

**I represent the above named non-profit organization.**

**I certify the above information to be correct, and have read and understand the above information.**

<b>Printed Name:</b>	<b>Title:</b>
<b>Signature:</b>	<b>Date:</b>

**Mail to: Fischer Flowers, Inc.  
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