Place Card # Sticker Here

A la vuelta la versión en español.
Please use blue or black ink.
Please make sure to fill out the following form in BLOCK lettering
Please return to your Waco H-E-B store or mail to :
H-E-B Customer Relations, P. O. Box 839999, San Antonio, TX 78283-9963
***Information Required**

Section A: This section must be filled out completely.

☐ I am a New Member

☐ I am an existing Member and need a new card; Current Card number_____

☐ I lost my cards, please cancel my existing cards

☐ Please update my contact information

Salutation

Mr. ◯1 Mrs. ◯3 Dr. ◯5
Ms. ◯2 Miss ◯4

First Name * Middle Initial(s)

Last Name *

Street Address * APT. #

City * State * ZIP Code * –

Telephone # – –

Birth Date[1]
Month Day Year

[1](Date of birth is required to register a Points Club Rewards account on heb.com. Register on heb.com and receive 1,500 Bonus Points)

Section B: This section must be filled out completely.

Today's Date
Month Day Year

I agree to be bound by the Terms and Conditions of the Points Club Rewards by H-E-B® program and consent to the use of my personal information by H-E-B as provided above and obtained through purchases made in accordance with the the program. H-E-B may share my information with third parties and business partners to customize the program and provide the service. To review the Terms and Conditions, please go to www.heb.com/pointsclub. To learn more about H-E-B's privacy practices, see privacy policy at www.heb.com at the bottom of the page.

Please sign within the box provided.

Signature X

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