

Mail-In Rebate Form

(Offer Code: FT-10103)



VALID ON THE FOLLOWING PRODUCT(S):

- MAXIMA RED SD 250 6PK ARROWS
(UPC: 044734508708)
(Model#: 50870)
- MAXIMA RED MO CONTOUR SD 400 6PK ARROWS
(UPC: 44734511852)
(Model#: 51185)
- MAXIMA RED MO CONTOUR SD 350 6PK ARROWS
(UPC: 44734511869)
(Model#: 51186)
- MAXIMA RED MO CONTOUR 400 6PK ARROWS
(UPC: 44734511913)
(Model#: 51191)
- MAXIMA RED MO CONTOUR 350 6PK ARROWS
(UPC: 44734511920)
(Model#: 51192)
- MAXIMA TRIAD 400 6PK ARROWS
(UPC: 44734511098)
(Model#: 51109)
- MAXIMA TRIAD 350 6PK ARROWS
(UPC: 44734511104)
(Model#: 51110)
- MAXIMA TRIAD 300 6PK ARROWS
(UPC: 44734511111)
(Model#: 51111)
- MAXIMA RED SD 350 6PK ARROWS
(UPC: 044734508715)
(Model#: 50871)
- MAXIMA RED 250 BLAZER VANES 6 PK
(UPC: 044734507534)
(Model#: 50753)
- MAXIMA RED 350 BLAZER VANES 6 PK
(UPC: 044734507541)
(Model#: 50754)

In order to qualify for this rebate you must purchase an eligible product between the dates of: 8/1/2021 and 8/31/2021.

Billing Address: (Please Print Legibly)

*First Name:

*Last Name:

*Address:

*City:

*State/Province: *Zip Code/Postal Code: *Phone Number

*Email Address:

Proof of Purchase



(Actual UPC May Vary)

*Purchase Date:

MAIL-IN OFFER NOT PAYABLE IN RETAIL STORES

Terms & Conditions

This rebate offer is available to qualifying end-user purchasers of a qualifying product. If any terms and conditions are not met the rebate will be denied. Distributors and dealers may not participate in this offer. The purchase date on your sales receipt, packing slip or invoice must be a date within the eligibility period indicated on the individual rebate application that you must print, sign and mail to the specified address obtained after registering online at http://https://www.4myrebate.com/. The address on your rebate application must match the billing address on the receipt, packing slip or invoice. Limit eleven (11) rebate per qualifying rebate offer, per person, billing address, company, household and receipt/invoice/packing slip during the eligibility period, except where prohibited by law. Only one (1) rebate application per envelope. Any request postmarked or received after the eligibility period will be denied. . . This Card is issued by Sunrize Banks N.A., Member FDIC, pursuant to a license from Mastercard International Incorporated. Mastercard is a registered trademark, and the circles design is a trademark of Mastercard International Incorporated. This card may be used everywhere Debit Mastercard is accepted. Registration, activation, acceptance, or use of this card constitutes acceptance of the terms and conditions stated in the Prepaid Card Agreement. Offer only valid in US (including Puerto Rico) and payable in US Dollars. Offer subject to change at any time. Void where prohibited by law. Use of fictitious names, multiple addresses and PO Boxes to obtain additional rebates may constitute fraud, violate federal or state laws and may result in prosecution, imprisonment and/or fines, including under the U.S. Mail Fraud Statutes (18 USC, Section 1341 and 1342). © Mastercard is a registered trademark of Mastercard International Incorporated. Neither the sponsor of the rebate ("Rebate Sponsor") nor the entity providing the rebate reward (the "Reward Vendor") is responsible for late, lost, misdirected or postage-due mail. Incomplete or illegible applications will be denied. Photocopies of UPCs are not accepted unless indicated on the rebate form. Rebate application status updates, approval, denial, and other notices may be sent via e-mail. You may check the status of your rebate by visiting the link provided in your e-mail or visiting http://https://www.4myrebate.com/. Please allow 3 weeks after mailing to make any inquiries regarding your rebate. Fulfillment of this rebate is subject to final approval by Feradyne Targets. Reward Vendor is not liable for non-fulfillment of offers by Feradyne Targets.

ENCLOSE:

1. Please include the following documents in your envelope for your rebate request:
 - Original UPC Barcode Label
 - Copy of Receipt/Invoice
 - Completed Rebate Form
2. This completed REBATE FORM or a copy of this coupon including the signature where requested.
3. Your rebate document must be postmarked by 9/14/2021
4. Valid only at purchases made at:
 - - All Resellers -

Mail Rebate to:

Rebate Processing

I have read and agree to the terms of this rebate.

Signature X _____

Date _____

Offer#: FT-10103
PO Box 472
Scottsdale, AZ 85252

For all customer service inquiries please call: 1-800-286-9146
Mon.-Fri. 9-6 pm EST