



## 2017 Enrollment Form

I have read and agree with these Program Rules and allow my dealership personnel to participate in these rewards programs.

Put a check in the box	x below:		
	e enrollment fee and allow my o cellence Rewards Program.	dealership personnel to partic	ipate in
Dealer Code:		_ *SID:	
Dealership Name:			
Dealer Principal Name	e:		
Email Address:			
Phone Number:			
	ature (or person listed on parag	•	
Date (month/day/yea	r):		
Service Manager or Pa enrollment:	arts Manager (Please Print Nam	e) to be contacted for person	nel
Email address of pers	on to be contacted:		
	Dealership Size	Enrollment Fee	
	Parts Group Size 1 or 2	\$75 Per Month	
	Parts Group Size 3	\$150 Per Month	
	Parts Group Size 4 and 5	\$200 Per Month	

Please fax enrollment to 844-MSER-FAX (844-673-7329). Questions please call Mopar Service Excellence Rewards Team at (866)909-MSER (6737).

No Fee

FIAT ALFA ROMEO Studios

<sup>\*</sup>Providing SID is MANDATORY and the only way we can enroll your dealership in MSER