

Inkjet and Laser Cartridge Recycling Fundraising Enrollment Form

ProfitQuests.com
318-542-7010 Office
512-366-9975 FAX

Date _____ Person Filling Out This Form _____ Title _____

Name of Organization _____ Telephone No. _____

Department or Program _____ Fax No. _____

Address _____ Suite No. _____

City/Town _____ State _____ Zip Code _____

Organization Web Site Address _____

Contact Person _____ E-mail Address _____

Type of Organization: _____ Non-Profit Status? Yes No

School: Home School PTO / PTA / Other College Boosters (Band, etc.)

Church Ministry Humane Society Cheer Group Scouting

Sports (League, Boosters, etc.) Other: _____

Is this your first time participating in a cartridge recycling program? Yes No

If No, what other programs have you participated in? _____

Who will be coordinating your recycling program? – Enter Coordinator Information Below

Name _____ Title _____ Telephone No. _____

Address _____

City/Town _____ State _____ Zip Code _____

E-mail Address _____

Would you be interested in Cell Phone Recycling too? (Yes/No)

Fax number or email address to send this information back to?

Other Information _____

Please fax this completed enrollment form to: (512) 366-9975