

SWIG SCRATCHERS PROMOTION
AMOE Entry Form and Information Verification Document

Personal Information

- **Full Name:** _____
- **Date of Birth (MM/DD/YYYY):** _____
- **Mailing Address:**
 - Street: _____
 - City: _____
 - State: _____
 - ZIP Code: _____
- **Contact Information:**
 - Phone Number: _____
 - Email Address: _____

By signing below, I acknowledge that I have reviewed and consent to be bound by the Official Rules of the SWIG Scratchers Promotion and Sponsor's Privacy Policy (<https://swigdrinks.com/privacy-policy/>).

Signature: _____

Date: _____

Instructions for Submission:

1. Please print and complete this form in its entirety.
2. Ensure all fields are accurately filled out and the form is signed.
3. Mail the completed form to the following address (postmark required for entry eligibility):

Savory Swig Stores, LLC
1557 W Innovation Way Suite 125 Lehi UT 84043
Attention: SWIG Scratchers Promotion AMOE Entry

This document is provided solely for the purpose of facilitating accurate entry information for the SWIG Scratchers Promotion. Any false, incomplete, or inaccurate information may result in disqualification at the sole discretion of Sponsor.
