



## TIRE PURCHASE REBATE FORM

Mail along with a copy of your tire purchase receipt that list the vehicle for which tires were purchased to:

Tire Purchase Rebate Department  
Automax Advantage Club  
P.O. Box 1130  
Asheville, NC 28802

Your Name \_\_\_\_\_ Member Number \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Year, Make & Model of Auto \_\_\_\_\_ Mileage \_\_\_\_\_

Signature \_\_\_\_\_

\*You must be an active member at the time the rebate is issued to be eligible. Rebates will only be issued in the name of the primary Automax Advantage Member. Please allow 6-8 weeks for rebate processing and forwarding of rebate payment. This national tire rebate program is provided exclusively to Members of the Automax Advantage Club.