

Marist College
Marist Money Merchant Application

Business/Store Information

(Business/Store Name)

(Business/Store Address)

(City)

(State)

(Zip Code)

(Business/Store Phone Number)

(Business/Store Fax Number)

(Business Description)

(Business/Store Primary Contact)

(Primary Contact E-mail address)

(Business/Store Secondary Contact)

(Secondary Contact E-mail Address)

(Business/Store Website)

Alcohol Sales: Yes No **If yes, alcohol as a percentage of Gross Sales:** _____%

Number of Years in Business: _____ **At Present Location:** _____

Owner/Corporate Information

(Owner Last Name)

(Owner First Name)

(Corporate Name)

(Corporate Address)

(City)

(State)

(Zip)

(Corporate Phone Number)

(Corporate Fax Number)

(Federal Tax ID#) (State Where Business is Incorporated) (Type of Corporate Entity)

(Corporate Primary Contact)

(Corporate Primary E-mail Address)

(Corporate Secondary Contact)

(Corporate Secondary E-mail Address)

Authorized Name and Title of Person Signing Agreement

(Printed Name) (Printed Title)

(Signature)

Advertising Information

The College reserves the right to use the information provided below in its advertising and promotional materials.

(Business Name)

(Business Address)

(Telephone Number) (Website Address)

Check All That Apply

- Hamburgers/American
- Coffee Shop
- Convenience/Pharmacy
- Fast Food
- Pizza/Pasta
- Ice Cream/Desserts
- Bookstore
- Full Service
- Ethnic Foods
- Health/Beauty
- Campus Dining
- Pick Up/Delivery Only
- Sandwiches/Deli
- Media/Computers
- Clothing/Apparel
- Other _____

Merchant application