EatStreet Sign Up Form

General Information (please print clearly)

Restaurant:	Hours of Operat	Hours of Operation:	
	Sunday	to	
Address:	Monday	to	
	Tuesday	to	
Phone Number:	Wednesday	to	
Primary Email:	Thursday	to	
	Friday	to	
If You Provide Your Own Delivery	Saturday	to	
Delivery Fee:	Delivery Zone:		
Delivery Minimum:			
Services			
X Marketplace Delivery			
Marketing Products: Top Listing Fee:	Featured Listing Fee:	Paid Email Advertisement Fee:	
Ordering Products: Restaurant Website	Ordering Button Commission:		
Commission			
Marketplace Commission: 15% + Processing Fee	Delivery Commi	Delivery Commission:	
Payment Method: Direct Deposit or Check (Check One)	-	Legal Business Name: (Optional)	
EIN Number:	Legal Business Address: (Optional)		
(Optional, THIS IS NOT A SOCIAL SECURITY NUMBER, DO NOT LIST SOCIAL SECURITY NUMBER	R)		
Order rechnology			
Order Transmission Method: 🗌 Tablet 📄 Email [(Can Check Multiple)	Fax Number:		
Optional Add-Ons: Cellular Tablet Service The *Additional Fees Apply (Can Check Multiple) Fee: Fee:	rmal Printer		
Authorization			
Either EatStreet or the Restaurant may terminate this agree	ement for any reason up	on notice to the other party.	
By signing below, I, as an authorized agent on behalf of th bound by this Agreement and EatStreet's Terms of Use, wh services: <u>https://eatstreet.com/restaurant-terms-of-servic</u>	nich are available in full te		
Name:	Phone Number:	Phone Number:	
Signature:	_ Additional Email	Additional Email:	

(Optional)

Date:	