



# Delta State University

## Okra Kard Pilot – Merchant Application

### Business/Store Information

(Business Name)

(Business Address)

(City)

(State)

(Zip Code)

(Business Phone Number)

(Business Fax Number)

(Business Description)

(Business Primary Contact)

(Primary Contact E-mail Address)

(Business Secondary Contact)

(Secondary Contact E-mail Address)

(Business Website)

Alcohol Sales:  Yes  No

Number of Years in Business: \_\_\_\_\_ At Present Location \_\_\_\_\_

### Owner/Corporate Information

(Owner Last Name)

(Owner First Name)

(Corporate Name)

(Corporate Address)

(City)

(State)

(Zip Code)

(Corporate Phone Number)

(Corporate Fax Number)

(Federal Tax ID#)

(State of Incorporation)

(Type of Corporate Entity)

(Corporate Primary Contact)

(Corporate Primary E-mail Address)

(Corporate Secondary Contact)

(Corporate Secondary E-mail Address)

(Corporate Website)

**APPLICATION CONTINUED ON NEXT PAGE**

## Reimbursement Information

### AUTHORIZATION FOR DIRECT DEPOSIT/WITHDRAWAL

I authorize Delta State University to initiate both deposit entries to my checking account for reimbursement of Okra Green Anywhere purchases. The authority will remain in effect until I notify Delta State University, in writing, to cancel this authorization.

\_\_\_\_\_  
(Name of Financial Institution) (Branch Address)

\_\_\_\_\_  
(City) (State) (Zip Code)

\_\_\_\_\_  
(Name on Bank Account)

\_\_\_\_\_  
(Type of Account) (Account Number) (Routing Number)

Select Preferred Frequency of Settlement: \_\_\_\_\_ Weekly \_\_\_\_\_ Bimonthly \_\_\_\_\_ Monthly

E-mail Addresses for Receipt of Daily Sales Reports: \_\_\_\_\_

I acknowledge responsibility for telephone lines and monthly rental of Lyric readers necessary to transact business via the Okra Kard. \_\_\_\_\_

Initial

## Authorized Name and Title of Person Signing Agreement

\_\_\_\_\_  
(Printed Name) (Printed Title)

\_\_\_\_\_  
(Signature)

## Advertising Information

The University 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

- |                                                |                                          |                                               |                                       |                                        |
|------------------------------------------------|------------------------------------------|-----------------------------------------------|---------------------------------------|----------------------------------------|
| <input type="checkbox"/> Hamburgers/American   | <input type="checkbox"/> Coffee Shop     | <input type="checkbox"/> Convenience/Gasoline | <input type="checkbox"/> Fast Food    | <input type="checkbox"/> Pizza/Pasta   |
| <input type="checkbox"/> Ice Cream/Desserts    | <input type="checkbox"/> Bookstore       | <input type="checkbox"/> Full Service Grocery | <input type="checkbox"/> Ethnic Foods | <input type="checkbox"/> Health/Beauty |
| <input type="checkbox"/> Pick Up/Delivery Only | <input type="checkbox"/> Media/Computers | <input type="checkbox"/> Clothing/Apparel     | <input type="checkbox"/> Deli         | <input type="checkbox"/> Pharmacy      |
| <input type="checkbox"/> Other _____           |                                          |                                               |                                       |                                        |