

Marketing Executive: _____



Restaurant Information

Restaurant _____

Restaurant Phone # _____

Address _____

City/State/Zip _____

Tax Information

Corporate Entity Name _____

Federal Taxpayer Identification # (9 digits)

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Corporate Entity Address _____

Corporate Entity City /State/Zip _____

Service Paid To

_____ % commission



username

password

Contact Information

Owner /Manager _____

Owner / Manager Phone # _____

Owner / Manager email _____

Restaurant (Authorized Signatory)

Signature _____

Signature _____

Print Name _____

Print Name _____

Title _____

Title _____



By signing the form, The Restaurant agrees to pay Dash Dine Delivery the commission indicated above, in addition to the delivery fee and tips from each order placed through GrubHub, Doordash, Slice, EzCater, Toast, Square,Clover,ChowNow, or your own website delivered by Dash Dine Delivery.



By signing the agreement, I Certify That I am authorized representative of the Restaurant and I have agreed to the above terms of this Restaurant agreement

Agreement Dated: _____