



MERCHANT DISCOUNT INFORMATION SHEET

NAME OF BUSINESS _____

TELEPHONE _____

ADDRESS _____

DISCOUNT DESCRIPTION (20 word limit, please)

Authorized by _____

Signature _____

Title _____

Date _____

NOTE: SHAD will publicize your participation in The SHAD Connection and send a complete list to new and renewing members until you change or withdraw it. Please make sure all management changes in personnel are aware of your participation in the discount program. Please mail, fax or email form (see contact information below).