



Café

Bakery

Catering

COME ON IN!

Corporate & Special Events

CORPORATE ACCOUNT APPLICATION

BUSINESS NAME: _____

CONTACT NAME: _____

ADDRESS: _____

PHONE #: _____ FAX # FOR BILLING: _____

CREDIT LIMIT APPLYING FOR: \$ _____

BANK: _____ BRANCH: _____

PHONE #: _____

C.C. ACCOUNT #: _____ EXP: ____ / ____

Preferred Payment Method:

- MC / VISA / AMEX
- Bill for payment using Corporate Check (Net 10 days)

PERSONS AUTHORIZED TO CHARGE ON THIS ACCOUNT:

All Corporate Accounts are billed bi-weekly. Statements will list the date, person that ordered, and order total. Any further account specifications must be requested prior to first order. If paying by credit card, these charges will be reflected upon your monthly Credit Card Statement.

I understand and agree to all the terms stated above:

Name (Print)

Title

Signature

Date

When completed, please fax to (858) 558-8917, or mail to:

Come On In!
 10184 Telesis Court
 San Diego, CA 92121