

# Application for Merchant Participation

## University of Kentucky Plus Account Off-Campus Program

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**Name of Merchant and/or Business:**

**Business Address:**

**Business Phone:**

**Fax:**

**E-Mail:**

**Contact Person:**

**Title:**

### **Type of Merchant Category**

What type of business do you operate?

Retail Sales

Restaurant

Retail/Restaurant Mix

Other *(please specify)*

### **For Retail Locations**

What types of goods and/or services do you primarily sell?

### **For Restaurants**

Please indicate the type of restaurant *(check all that apply)*

Dine In and Carry Out

Dine-In Only Restaurant

Carry Out Only Restaurant

Bar and Restaurant

Pizza Delivery

Delivery/Retail

Specialty/Other *(please specify)*

What is the average meal cost at your location?

### **For Retail/Restaurant Mix**

Please estimate the percentage of restaurant sales: \_\_\_\_\_%

Please estimate the percentage of retail sales: \_\_\_\_\_%

What is the average meal cost at your location?

### **For ALL applicants**

What are your annual sales?

Please estimate the percent of your sales attributable to UK students.

How many miles is your nearest location from campus?

***Please mail or fax your completed application to:***

Stephanie Risner  
University of Kentucky  
Dining & Plus Account Office  
101 Student Center  
Lexington, KY 40506-0030

(859) 257-1062 (telephone)

(859) 323-3837 (fax)