



America Eats for Israel

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Alyssa Small
Martelle Spiewak
Eytan Veres
Shlomo Weissberg
Amanda Zaslowsky
Elisheva Zinberg
Regional Directors

Name of Restaurant: _____

Address of Restaurant: _____

Telephone: (Business Hours) _____

Name of Owner: _____

E-mail Address: _____

I, THE UNDERSIGNED, HEREBY AGREE TO DONATE 10% OF THE GROSS REVENUE THAT MY EATING ESTABLISHMENT RECEIVES FROM 12:00:00 A.M. MARCH 11TH, 2008 UNTIL 11:59:59 P.M. MARCH 11TH, 2008, TO THE AMERICA EATS FOR ISRAEL PROGRAM WITHIN THIRTY (30) DAYS OF SAID DATE.

I UNDERSTAND THAT FAILURE TO PAY MAY RESULT IN EXCLUSION FROM THE AMERICA EATS FOR ISRAEL PROGRAM IN FUTURE YEARS.

I CONSENT TO ALLOW AMERICA EATS FOR ISRAEL, THE VOLUNTEERS, AGENTS, AND OFFICERS OF AMERICA EATS FOR ISRAEL TO USE THE NAME OF MY EATING ESTABLISHMENT FOR ALL PUBLICITY AND ADVERTISING PURPOSES.

I AGREE THAT I AM THE OWNER OR MANAGER OF THE SPECIFIED EATING ESTABLISHMENT. I HAVE READ AND UNDERSTOOD ALL THE TERMS OF THIS CONTRACT, AND WILL, TO THE BEST OF MY ABILITY, UPHOLD THIS CONTRACT.

 Please sign here