

COMPANY NAME			
ADDRESS	Street:		
	City:	State:	Zip:
CONTACT #1 INFORMATION	Name:	Position:	
	Email:	Phone:	
CONTACT #2 INFORMATION	Name:	Position:	
	Email:	Phone:	
COMPANY SIZE	_____ # OF LOCATIONS		

How do you plan to inform your member/employees of this program?

- Company Intranet
- Email
- Newsletter
- New Hires Package
- Posters for Bulletin Boards
- Check/Payroll Stuffer
- Other _____

Which of the following geographic region(s) are applicable to your organization?

- National
- California
- Texas
- Florida/South Florida
- East Coast
- Midwest
- Other _____

ALL OFFERS ARE CONFIDENTIAL & NOT AVAILABLE TO THE GENERAL PUBLIC:

By signing this Application and Company Setup Form, the members and employees in your Company are enrolled as members of the Plum Benefits powered by TicketsatWork Program. The company/organization agrees that all conversations and documentation regarding entertainment discounts & benefits are not available to the general public and agrees to promote and distribute the information about the Plum Benefits powered by TicketsatWork Program Presented by Entertainment Benefits Group to members and/or employees via corporate communications only (intranet website, email, bulletin boards, newsletters, etc.). Plum Benefits powered by TicketsatWork agrees that all member/employee information will be kept private and confidential for the primary purpose of providing products, promotions & services directly by Plum Benefits powered by TicketsatWork.

I agree that as a Corporate Member Company in this program, member and employee participation in the program offered is completely voluntary.

NAME

SIGNATURE

DATE

Return Form To:
Plum Benefits powered by TicketsatWork
ATTN: Client Services
535 8th Avenue, 9th Floor New York, NY 10018
clientservices@plumbenefits.com