



## Hudson Valley Seafood CLIENT REGISTRATION FORM

<b>Legal Company / Business Name:</b>					
<b>Specialties:</b>					
<b>Delivery/Service Address:</b>					
<b>City:</b>		<b>State:</b>		<b>Zip:</b>	
<b>Hours of Operation:</b>					
<b>Delivery Door Location:</b>					
<b>Delivery Time Objective</b>		<b>No Earlier Than:</b>		<b>No Later Than:</b>	
<b>Notes / Requests:</b>					
<b>Web page/Google+/Facebook/etc:</b>					

<b>Primary Contact Name:</b>				<b>Position:</b>	
<b>Primary Number:</b>	(       )	<b>Fax:</b>	(       )		
<b>Do you send and receive <u>text messages</u> regularly?</b>		<b>Yes / No</b>	<b>#</b>	(       )	
<b>Is <u>Email</u> a good way to communicate with you?</b>		<b>Yes / No</b>	<b>Email:</b>		
<b>Web page/Google+/Facebook/etc:</b>					

<b>Billing Contact Name:</b>				<b>Position:</b>	
<b>Billing Phone Number:</b>		(       )	<b>Billing Fax:</b>	(       )	
<b>Best time of day to call:</b>		: - :	<b>Is <u>Email</u> a good way to communicate with you?</b>		<b>Y / N</b>
<b>What is your preferred method of payment?</b>		<b>Check / C.O.D.</b>		<b>Notes:</b>	
<b>Billing <u>Email</u> Address</b>					
<b>Billing Mailing Address:</b>					
<b>City:</b>		<b>State:</b>		<b>Zip:</b>	

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<b>Preferred Products:</b>	Whole Fish / Fillet / Frozen / KOSHER / Specialty / Shellfish		
<b>In case of lockout:</b>			
<b>Notes / Requests:</b>			
<b>Additional Names to Know:</b>			
<b>Additional Names to Know:</b>			
<b>Would you like to receive weekly and daily bulletins?</b>	<b>Yes / No</b>	<b>Best way:</b>	<b>Email / Text</b>

<b>Additional Notes:</b>

<b>Suggestions and Comments:</b>