

# MALIBU YOGURT AND ICE CREAM, LLC

## PERCENTAGE NIGHT APPLICATION

Malibu Yogurt and Ice Cream is pleased to offer percentage nights to groups, teams, and organizations trying to raise money in a fun and delicious way.

The team at Malibu Yo would like to contribute to as many worthy causes as we can by inviting fund raising groups to raise public awareness, and promote their cause while enjoying our new and exciting atmosphere as well as our outstanding frozen treats and coffee too.

To make sure all parties get the right services from Malibu Yogurt and Ice Cream, Percentage nights should be scheduled at least one week in advance.

It is up to each group to market their event. The greater number of guests that participate the higher the percentage% of total gross sales from your night. Please have a name for your group and a minimum of 15 attendees. A numbered list of names and \$ spent will be sent to the organizer of each event with a check by mail within 5 business days.

- \*15-25 guests      7% of groups total gross sales
- \*26-50 guests    10% of groups total gross sales
- \*51-75 guests    13% of groups total gross sales
- \*76 or more      20% of groups total gross sales

\*\*It is important that the organizer of your event be present at Malibu Yogurt and Ice Cream for the duration of the percentage night in order to keep track of the guests as well as promote your cause.

1<sup>st</sup> CHOICE DATE AND TIME: \_\_\_\_\_

2<sup>nd</sup> CHOICE DATE AND TIME: \_\_\_\_\_

3<sup>rd</sup> CHOICE DATE AND TIME: \_\_\_\_\_

ORGANIZATION NAME: \_\_\_\_\_ TAX ID# \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ TITLE: \_\_\_\_\_

CONTACT EMAIL: \_\_\_\_\_ PH# \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CONTACT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Return this form to the store or contact Bill at [wwild31380@aol.com](mailto:wwild31380@aol.com) cell 906-282-2699