



Caterease Administrator Password Authorization

Please have a Principal or General Manager of your facility fill out the following form and fax to **239-263-4164**. (This form can also be scanned and emailed to **help@caterease.com**.)

Company Name: _____

Date: ____/____/____

I authorize Caterease Software (Horizon Business Services, Inc.) to email a temporary Caterease Administrator password to:

E-Mail Address

Signature

Name (Please Print)

Title

Please note: The Caterease Administrator password should be changed immediately upon login. However, this password will allow anyone into your Caterease system, regardless of user or administrative password changes.