

7361 North 7 Mile Road Lake City, Michigan 49651 Phone: 231-229-4247 Fax: 231-229-4615 info@bohning.com

Wholesale Customer Application

All information will be kept confident and used only in determining the qualifications for establishing your company as a wholesale customer. It is necessary to complete and return this form <u>and</u> include a copy of your state tax license or business license <u>before</u> any shipment will be made.

Type of account desired:□Credit Card□Prepayment□C.O.D.

Company Name:		
Mailing Address:	Shipping Address:	
Phone:	Fax:	
Email:	Contact Name:	

Is your company known by any other name?:	Number of years in business:	
Business Profile: Retail Sales Repair/Pro Shop Manufacturer Other (specify) 	Type of Ownership:OrporationPartnershipProprietorshipOther (Specify)	
Nature of Products:ArcherySporting GoodsGolfFishing LuresOther (Specify)	DNS #: Tax ID #:	

Principle Owner(s)	Position	Home Address	Home Phone

Credit / Business References (Please list U.S. Manufacturers if possible)

Company	Account #	Phone & Fax Numbers	Address

I/WE acknowledge receiving a copy of this application and declare my/our willingness to abide by THE BOHNING COMPANY terms of payment. It is also agreed the I/we will pay a late fee of 2% per month of the total amount past due, and should a default in payment occur, I/my company will pay all reasonable collection costs, attorney fees and court expenses. If a suit is instated due to nonpayment, it is understood that THE BOHNING COMPANY, LTD. will be recognized as having venue and jurisdiction.

In consideration of THE BOHNING COMPANY, LTD. extending credit to my/our company, I/we as (an) officer(s), do personally guarantee and indemnify THE BOHNING COMPANY, LTD. against loss or indebtedness from my/our company. This guaranty shall be a continuing and irrevocable guaranty which shall be binding upon me and my/our legal representatives, and notice of default waived.

Information provided on this form is given for the purpose of obtaining credit, and is warranted to be true. THE BOHNING COMPANY, LTD. is authorized to contact the references on this application and verify my/our credit/financial history and experiences.

Signed:	Soc. Sec. #:	Date:
Signed:	Soc. Sec. #:	Date:

Return this application along with a copy of business or state tax license to:

Credit Manager The Bohning Company 7361 North 7 Mile Road Lake City, MI 49651

Or

Fax: 231-229-4615 Attn. Credit Manager