



***“Xperience Perfection™”***

Xpedition Archery LLC, 2008 E. Hwy 50 in Yankton, South Dakota 57078

**TO APPLY FOR AN ACCOUNT, PLEASE SUBMIT ALL OF THE FOLLOWING INFORMATION:**

1. This application must be completed and signed by an officer/owner of the company.
2. A copy of your business/state sales tax license.
3. A copy of a form of advertising: (business card, copy of phonebook listing, newspaper ad, etc.)
4. Provide a photograph of your business.

***THIS APPLICATION AND ANY ORDER ACCOMPANYING THIS APPLICATION WILL BE PUT ON HOLD IF ALL REQUESTED INFORMATION IS NOT PROVIDED.***

PAYMENT TERMS REQUESTED: Wire Transfer \_\_\_\_\_ PREPAY \_\_\_\_\_ CREDIT \_\_\_\_\_  
CREDIT LIMIT REQUESTED \$ \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

BILLING (MAILING) ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

SHIPPING ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

WEBSITE ADDRESS: \_\_\_\_\_

BUSINESS/TAX LICENSE#: \_\_\_\_\_ \*NUMBER OF YEARS IN BUSINESS: \_\_\_\_\_

**\*IF YOUR BUSINESS IS LESS THAN 2 YEARS OLD, YOU MUST SIGN THE PERSONAL GUARANTY TO BE CONSIDERED FOR AN OPEN LINE OF CREDIT.**

TYPE OF PRODUCTS SOLD \_\_\_\_\_

BUSINESS LOCATION: Community Bldg: \_\_\_\_\_ Part of Home \_\_\_\_\_ Bldg on Premise \_\_\_\_\_

NORMAL BUSINESS HOURS: \_\_\_\_\_

TOTAL RETAIL SPACE (sq. ft.) \_\_\_\_\_ # Of Employees: Full-Time \_\_\_\_\_ Part-time \_\_\_\_\_

AVERAGE INVENTORY DOLLARS: \_\_\_\_\_ ANNUAL SALES: \_\_\_\_\_

TYPE OF BUSINESS: PROPRIETORSHIP \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_ CORPORATION \_\_\_\_\_  
OTHER \_\_\_\_\_

FEDERAL IDENTIFICATION # \_\_\_\_\_

IS THE COMPANY AFFILIATED WITH A BUY GROUP ASSOCIATION (CIRCLE ONE)? YES NO

IF YES, PLEASE PROVIDE BUY GROUP NAME \_\_\_\_\_ AND MEMBER NUMBER \_\_\_\_\_

IF SOLE PROPRIETORSHIP OR PARTNERSHIP PLEASE LIST NAME OF OWNERS:

\_\_\_\_\_  
(NAME) (TITLE) (ADDRESS)

\_\_\_\_\_  
(NAME) (TITLE) (ADDRESS)

Has the company or any of its principals/owners and or guarantors been involved in a bankruptcy proceeding (circle one)? YES NO

If yes, please describe the circumstances \_\_\_\_\_

\_\_\_\_\_

BUSINESS PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

OWNER NAME: \_\_\_\_\_

OWNER RESIDENCE ADDRESS: \_\_\_\_\_

RESIDENCE PHONE# \_\_\_\_\_

BUYER NAME AND CONTACT # \_\_\_\_\_

BUYER EMAIL: \_\_\_\_\_

ACCOUNTS PAYABLE NAME & CONTACT # \_\_\_\_\_

ACCOUNTS PAYABLE EMAIL: \_\_\_\_\_

**TRADE REFERENCES**

PLEASE LIST 4 REFERENCES WITH WHOM YOU HAVE DONE BUSINESS ON CREDIT TERMS FOR AT LEAST SIX MONTHS

NAME \_\_\_\_\_ CONTACT PERSON \_\_\_\_\_

PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

NAME \_\_\_\_\_ CONTACT PERSON \_\_\_\_\_

PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

NAME \_\_\_\_\_ CONTACT PERSON \_\_\_\_\_

PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

NAME \_\_\_\_\_ CONTACT PERSON \_\_\_\_\_

PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

BANK NAME \_\_\_\_\_ CONTACT PERSON \_\_\_\_\_

PHONE# \_\_\_\_\_ FAX# \_\_\_\_\_

ACCOUNT # \_\_\_\_\_

**TO ACTIVATE YOUR ACCOUNT, PLEASE SIGN AND RETURN THIS DOCUMENT:**

**APPLICANT HEREBY AGREES THAT ALL PURCHASES MADE ARE SUBJECT TO THE FOLLOWING TERMS & CONDITIONS:**

1. I hereby certify that I have the authority to apply for credit on behalf of Applicant identified below and the Applicant hereby authorizes Xpedition Archery ("Creditor") to investigate Applicant's credit history, bank references and any other sources of information deemed necessary to extend credit as allowed by the Federal Fair Credit Reporting Act and applicable State law, or international treaty. Credit decisions by each Creditor are made independently and acceptance of Applicant's credit by one Creditor does not obligate the other Creditor to extend credit to Applicant.
2. Applicant will obey all laws, including without limitation, the U.S. Foreign Corrupt Practices Act and the Export Administration Act, if applicable.
3. All sales are considered final. Returns, other than for defective product, are at the sole discretion of Xpedition Archery and require a return authorization number (RA) from Creditors' customer service department.
4. Authorized returns, excluding defective product and errors on the part of a Creditor, will be assessed a 15% restocking charge.
5. Applicant agrees to pay invoices in accordance with the Creditors' terms of sale, which are Net 30 Days from date of invoice unless specified otherwise on invoice.
6. Applicant is responsible for all costs of collection including reasonable attorneys' fees incurred by a Creditor in collecting any amounts due it or enforcing its rights.

7. Applicant hereby gives a purchase money security interest to the applicable Creditor in all products purchased from the Creditor (now owned and hereafter acquired) to secure payment of any account balance owed.
8. Applicant agrees to immediately notify Creditors' customer service department of all shortages, price discrepancies or freight disputes.
9. Applicant acknowledges and agrees that a service charge of \$25 will be payable by Applicant for each check returned for insufficient funds.
10. Creditor reserves the right to discontinue credit if the above terms and conditions are not met.

\_\_\_\_\_  
**Company Name ("Applicant")**                      **Billing Address**                      **City, State, Zip**

\_\_\_\_\_  
**Authorized Signature of Officer / Owner**                      **Please Print Name and Title**                      **Date**

**PERSONAL GUARANTEE OF INDEBTEDNESS \*\***

To induce Xpedition Archery (each hereinafter the "Seller") to approve this Credit Application and Purchase Terms Agreement with the above applicant (hereinafter the "Debtor") and in consideration of its so doing, the undersigned guarantor(s) does/do hereby jointly, severally, and personally guarantee all sums which may be owed by the Debtor to the Seller and performance of all the terms of the purchase by the Debtor.

Seller may enforce this agreement against the undersigned guarantor(s) or any of them, jointly or severally, whether or not any action is ever taken by it against the above Debtor.

The liability of the guarantor(s) shall be primary and shall not be affected by the bankruptcy of the Debtor.

Guarantor's Signatures  
**(DO NOT INSERT CORPORATE TITLES)**

\_\_\_\_\_  
 Signature (Personally and as an individual)                      Date                      Type or Print Name                      Social Security #

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 Signature (Personally and as an individual)                      Date                      Type or Print Name                      Social Security #

\_\_\_\_\_  
 Address

**\*\* AS PREVIOUSLY STATED IN CREDIT APPLICATION, IF YOUR COMPANY HAS BEEN IN BUSINESS LESS THAN 2 YEARS, THE PERSONAL GUARANTEE MUST BE SIGNED TO BE CONSIDERED FOR CREDIT.**

Completion of this application does not guarantee credit.

Xpedition Archery, LLC. 2008 East Hwy 50 Yankton, South Dakota Ph: 605-260-0159 Fax : 605-665-1479