

Embroidery Etcetera Wholesale Application

Shop _____ Owners Name(s): _____

Billing Address: _____

Shipping Address: _____

UPS Certified Business Address? (circle one) YES NO

Phone _____ Fax Number: _____

Email Address: _____

Website Address: _____

Years in Business: _____ Sales Tax _____

BANK REFERENCE INFORMATION

Bank Name: _____

Address: _____

Account Number: _____ Phone Number: _____

TRADE REFERENCE INFORMATION

(at least 1 must be supplied)

Company: _____

Address: _____

Account Number: _____ Contact: _____

Phone Number: _____

PAYMENT INFORMATION

At this time we are set up for Mastercard, Visa or Paypal Sales.

Mastercard Visa Paypal _____

Name on Credit Card: _____

Exp _____ Security Code: _____

Credit Card Number: _____

I certify that the merchandise that I purchase is intended for resale to consumers in my retail store or a retail store location.

Owners Signature

Date

Please fax this completed application to Embroidery Etcetera
ATTN: Wholesale Application at (540) 382-9544