Bowtech - Excalibur 2017 APPLICATION











PLEASE FILL OUT THE ENTIRE FORM TO THE BEST OF YOUR ABILITY. THIS FORM MUST BE SIGNED IN ORDER FOR YOUR DEALERSHIP TO BE APPROVED. IF YOU ARE A NEW BUSINESS, WE WILL HAVE TO RUN YOUR PERSONAL CREDIT TO APPLY FOR TERMS.

Complete Legal Business Name			Store Hours		Yrs. In Business	
Owners Name (print)			# of Full Time Employees		Retail Square Footage	
Store Location (street)			Business Phone #		Business Fax #	
			Business i none ii		Business rux ii	
		a Hu and		"		
Business Tax ID #	State ID #		Cell# or 2 nd contact #		Home #	
Shipping Address, if different			Email Address			
Mailing Address, if different			Web Address			
# of full time employees	Yrs. In Business	Retail Sau	l are Footage	Store	e Hours	
# or run time employees	113. III Dusiness	i Netali Oqu	are i oolage	Store	Filouis	
Accounts Payable address: Co		Contact na	Contact name and Phone:			
Archery Buyer:		Store Manager:				
Tribility Buyon.						
# of years at this location: # of years in business under this name:					Annual Sales Volume	
Please fill out the information	n below completely so we can	make an in	formed decision a	bout y	our request to become	
a dealer. Required	• •			•	•	
•						
Annual Archery sales volume 2	2015 (\$)	\$)2014 (\$)		# of certified		
Bow technicians						
Do you have (please circle all	applicable) Indoor Archery Ra	ange / (#of la	anes) / Outdo	oor Ra	nge / Leagues / 3-D	
Range	applicable) madel / trollery rec	ingo / (//or ic	7 Outa	JOI IX	nge / Leagues / o D	
				_		
What percentages of your ann					% Low% raditional%	
	Раскауе Во	JWS7	o Clossbows	70 1	Tauliioiiai70	
What bow brands do you currently carry? # of units sold (last calendar year) Required 1.)of units						
2.)# (of units 3.)	#	of units			
4 .)# Of the brands listed, what is yo	of units	2	Why?			
What bow do you personally s			vviiy?_ ?			

DOES YOU COMPANY HA		G/ROUTING GUIDE IF YES PLEAS		JAL?			
CURRENTLY A BOWTECH				CALIBUR CUSTOMER?	Y N		
Applying for terms? Y N Credit Limit Desired If No terms: COD or CC Name on Card: Card # Exp:/ Security Code ARE YOU A MEMBER OF A BUYING GROUP? Y N NAME ACCOUNT#							
Tax Information for Canadi	an Customer:	Current Bowtech Co	ustomer? Y N				
Fed Tax ID	Social Secui	rity ID	Name as appe	ears on card			
Face by Comment's an Comp 110, October	ataman Basala						
Tax Information for US Cus		no e of Business (chec	k one)				
			k one)				
		Sole Proprietorship Partnership					
		LC, State					
			RIN#	EIN#			
WNERSHIP:	Ŭ,	zorporanori, ciato					
lame of Owner			Phone				
lome Address		City	F110116 _	7in			
Name of Owner Nome Address		City	1 none _ State	7in			
Regular Archery Trade Ref	erences:						
Please check current or reconstruction Hoyt□ Lancaster□ Elle	•	y's PSE	Easton				
RADE REFERENCES:							
Company							
Address							
Company							
Address							
Company							
Address				State Zip			
BANK REFERENCES:							
Bank							
Account #	City	State	Zip	Phone			
Bank		Co	ntact Name				
A = = = + 11	0:4.	Ctoto	7:	Dhana			

PLEASE ATTACH PHOTOS OF YOUR STORE FRONT, RETAIL SPACE, AND RANGE (IF AVAILABLE) WHEN SUBMITTING THIS APPLICATION.

Complete Legal Business Name	

TERMS OF SALE AUTHORIZATION

Bowtech, Excalibur, Diamond, Octane, and Stryker shall be referred to as Company in this agreement. I agree to pay all invoices in accordance with the terms stated on each invoice and to pay a late charge of 1-1/2% per month, 18% per annum, on the balance of my account if not paid according to these terms. If the account is referred to a collection agency or attorney for collection, I agree to pay all collection agency fees, reasonable attorney's fees, and any necessary court costs and other expenses stemming from any legal action. and/or disbursements, even if a complaint is never filed with a Court. The laws of the State of Oregon shall exclusively apply to all aspects of the parties' relationships and dealings. If a legal proceeding is commenced to collect on this account, Company shall be entitled to recover reasonable attorney's fees, costs and disbursements in such proceeding, or appeal thereof. If a legal proceeding is brought, venue shall be in the county and state of Company's choice and the laws of Oregon shall govern. In the event of termination of the Dealership, or default by the Dealer, with respect to any terms or conditions contained in the Dealer Application, Credit Application or Dealer Policy Manual, or if Company deems itself insecure regarding its ability to collect the account balance, the entire account balance shall be immediately due and payable. Company may at any time, for any reason whatsoever, refuse to extend credit regarding this account or any other account I may have with the Company. Checks dishonored by the bank upon which they are drawn will be subject to a fee of \$25.00 per occurrence. The undersigned hereby warrants that all purchases are for business or commercial purposes and are not for personal, family or household use. Applicant acknowledges that Company may establish and maintain a credit file based on verification of the information contained in the application and that it will be periodically reviewed and updated as Company deems necessary. I authorize Company to contact my references regarding my credit standing. I represent the above information is complete and accurate, and that I expect Company to rely on this information in the extension of credit. All prices are inclusive of US "Federal Excise Tax" on Archery Equipment. Excalibur Crossbow US Inc. assumes responsibility for calculation and remittance of "FET".

IMPORTANT! SIGNATURE(S) REQUIRED TO PROCESS THIS APPLICATION

ALITHODIZED CICALATUDE*

888-689-1289 toll free

Credit Limit	Approved	Date
	Dealer Number	
Pricing Program	FOR OFFICIAL USE ONLY Payment Terms Rep Group	Commission rate
D/(12		
SIGNATURE	PRINT NAME	SOC. SEC. #
SIGNATURE	PRINT NAME	SOC. SEC. #
evaluate the credit worthiness business credit as contemplat consumer credit report on the represented by the credit app	sent(s) to Company's use of a non-business consumer cress of the undersigned as principal(s), proprietor(s) and/or goted by the accompanying credit application. The undersigned undersigned from time to time in connection with the extension. The undersigned as (an) individual(s) hereby known credit Reporting Act as contained in 15 U.S.C Sec. 16	uarantor(s) in connection with the extension of ned hereby authorize(s) Company to utilize a ension or continuation of the business credit owingly consent(s) to the use of such credit repor
	AUTHORIZATION TO OBTAIN A CONSUMER CRI	EDIT REPORT
SIGNATURE	PRINT NAME	DATE
	s in such proceeding or any appeal thereof. PRINT NAME	DATE
	enced to interpret or enforce this Guaranty, Company sha	all be entitled to recover its reasonable attorney's
Indebtedness, including exter	ontinuous and each of the undersigned hereby consents to inding credit, changing the terms of any Indebtedness, or r proceed directly against Guarantor without first proceedin mpany may possess.	eleasing any security or obligor, all without notice
Each of the undersigned, indi of the Applicant (Indebtednes	vidually and jointly, hereby unconditionally guarantees ful s) to Company.	I payment of all present and future indebtedness
	INDIVIDUAL GUARANTY	
*Signer must be able to legall	y obligate the business for payment of the account balance	ce.
TYPE OR PRINT NAME		
AUTHORIZED SIGNATURE		DATE

Email: Mandi.palmer@bowtecharchery.com Rev. 11/01/2016

541-284-4930 fax