

W.S. Badger Company, Inc.

New Customer Information Form

To Prospective Customers:

Please fill out this application as completely as possible to help us serve you more quickly. A signature is required (See below) from an owner and/or authorized representative.

In order to set you up with a new wholesale account, please review our wholesale policies and send us the following:

- 1. Completed and signed New Customer Information Form**
- 2. Resale Certificate**
- 3. Completed and Signed Credit Application for those requesting Net 30 terms**

Business Name: _____ **Legal Name (if different):** _____

Kind of Business (check all that apply to Badger):

Retail Store Web Store Catalog Distributorship Service Provider (e.g. Massage Therapist)

Describe Business: _____

Do You Sell Internationally? Yes No If Yes, to which countries: _____

Do You Sell On the Internet? Yes No What web address(es) will you be selling Badger on?: _____

Buyer Name: _____ **Phone / Ext.:** _____

Email: _____ **Fax:** _____

Billing Address: _____

Shipping Address: _____

May we contact you periodically with information on new products and specials?

Phone Email Fax Please do not contact me

I have read and agree to abide by your wholesale policies.

Signature of owner or authorized agent: _____ Date _____

P.O. Box 58 • 625 Route 10 • Gilsum, NH 03448 Phone: 800-603-6100 or 603-357-2958 • Fax: 603-352-4818
Email Questions: custserv@badgerbalm.com Email Orders: orders@badgerbalm.com