



7920 Stage Hills Blvd * Bartlett TN 38133 * 901.385.0400 * FAX 901.384.7712

NEW ACCOUNT FORM

NAME OF BUSINESS _____ DATE _____

BILLING ADDRESS _____ CITY _____ STATE _____ ZIP _____

SHIPPING ADDRESS _____ CITY _____ STATE _____ ZIP _____

PLEASE INDICATE IF SHIPPING LOCATION IS (PLEASE CIRCLE ONE) RESIDENTIAL OR COMMERCIAL

NAMES OF PERSONS AUTHORIZED TO ORDER ON THIS ACCOUNT _____

DOES YOUR COMPANY HAVE A VALID BUSINESS LICENSE TO SELL RETAIL OR WHOLESALE TROPHIES AND/OR AWARDS? (PLEASE CIRCLE ONE) YES NO (IF YES, PLEASE FORWARD A COPY OF THE LICENSE)

DO YOU HAVE AN ORDER PENDING TODAY? (PLEASE CIRCLE ONE) YES NO

SALES TAX # _____ (PLEASE FAX COPY OF SALES TAX CERTIFICATE WITH APPLICATION!) THIS IS REQUIRED FOR ACCOUNT SETUP.

E-MAIL ADDRESS _____ INVOICES WILL BE E-MAILED TO THIS ADDRESS!)

PHONE # _____ FAX # _____ MOBILE/CELL # _____

CREDIT CARD ACCOUNT # _____ EXP. DATE _____ CVV _____

NAME ON CREDIT CARD/RESPONSIBLE PARTY _____

I _____, AUTHORIZE CONTINENTAL AWARDS AND TROPHIES TO CHARGE MY CREDIT CARD AUTOMATICALLY WHEN I PLACE AN ORDER

*******PLEASE FAX AND THEN MAIL SIGNED ORIGINAL APPLICATION TO ADDRESS ABOVE*******

Signature

Name

Title