



WHOLESALE ACCOUNT APPLICATION

Thank you for your interest in establishing an account with Richardson. If accepted you will be able to produce headwear for your own brand or retailing needs. Please note this is not an application to become an authorized reseller of Richardson to other brands, companies, or any other needs outside of this scope. Please complete the following new account information form as well as the credit application and agreement if you are requesting open terms. Once we receive the completed forms, a member of our sales team will contact you to discuss your new account status.

MINIMUM ANNUAL PURCHASE REQUIREMENTS

Accounts must maintain minimum annual purchases of \$10,000 per calendar year. Accounts may be inactivated without notice if the minimums aren't met.

TERMS AND CONDITIONS OF SALE

OPEN TERMS

Net 30 day terms may be granted upon approval of a signed credit application. A finance charge of 1.5% per month (18% APR) will apply to any unpaid balance beyond established terms. Orders may be subject to a deposit prior to production based on size of order and your credit limit. Richardson reserves the right to revoke open terms at any time.

PAYING WITH CREDIT CARDS

We accept payment by Visa, Mastercard, Discover and American Express at the time of shipment without a convenience fee. Orders may be subject to a deposit prior to production based on size of order and any available order history. A convenience fee will be added when any open account balance is paid with a credit card.

ORDERING INFORMATION

MINIMUM ORDER/SHIPPING & HANDLING

We have a minimum order requirement of \$50.00 per order. A \$10.00 fee will be charged for any order less than \$50.00. We provide a variety of shipping methods and tools for your convenience. If not specified upon placement of order, we will ship using the most economical ground service available. Freight collect numbers will be accepted, wherein the receiver is responsible for the transportation charges. In the instance a freight collect invoice is not paid to the carrier by the receiver, and the carrier in turn charges Richardson for the shipping amount, we will invoice that amount directly to your account for payment.

PRODUCTION

MANUFACTURING VARIANCE

Please note there is a 1/8" manufacturing variance on decorated items. Any claims that fall within this allowance will not be considered available to be returned or credited.

COLORS AND STYLES MAY VARY

Color shade variations are inherent with any fabric during the dyeing process and we cannot guarantee color shades will match previous shipments. Prolonged exposure to light or moisture may cause fading or discoloration and is not a defect in the cap. Slight imperfections in pigment-dyed and garment-washed caps are a natural feature of these cap styles.

RETURNS AND CREDITS

BLANK (NON DECORATED) CAPS

Please alert us if you have product needing to be sent back as no returns will be accepted without a return authorization number. PO or order number must be provided.

Items returned are subject to a 10% restocking fee or a \$20.00 minimum fee. Customer is responsible for freight charges. These requests must be made within 60 days of receipt of product.

All claims for shortages, damaged goods, etc. must be made within five days of receipt of product. Customer will not be responsible for freight charges for any product sent back as a result of our error.

Please check all shipments BEFORE decoration application. We cannot accept returned caps after decorating or washing. Caps over 60 days old will not be accepted. Worn caps will not be accepted.

DECORATED CAPS

Please alert us if you have product needing to be sent back as no returns will be accepted without a return authorization number. PO or order number must be provided.

All claims for shortages, damaged goods, incorrect decoration, etc. must be made within five days of receipt of product. Each claim will receive a review by Richardson based on original confirmations and art approvals.

We cannot accept returned caps after washing. Caps over 60 days old will not be accepted. Worn caps will not be accepted.

Customer will not be responsible for freight charges for any product sent back as a result of our error.

RICHARDSON CORPORATE HEADQUARTERS SPRINGFIELD, OREGON

PO Box 71130

Springfield, Oregon 97475 USA

Tel: (541) 687-1818 | 1-800-545-8686 Fax: (541) 687-1130 | 1-800-451-9203

sales@richardsonsports.com

www.richardsonsports.com

RICHARDSON®



FOR OFFICE USE ONLY

ACCT. # _____

TM: _____ CT: _____

PL: _____ SR: _____

NEW ACCOUNT INFORMATION

FULL BUSINESS NAME: _____

DBA: _____ RESALE CERTIFICATE NUMBER _____

BILLING ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE # _____ FAX # _____ WEBSITE _____

SHIP TO ADDRESS (IF DIFFERENT FROM ABOVE): _____

CITY/STATE/ZIP: _____

CONTACT INFORMATION

MAIN CONTACT/BUYER: _____ PHONE: _____ EMAIL: _____

ACCOUNTS PAYABLE CONTACT: _____ TITLE: _____

PHONE # _____ FAX # _____ EMAIL: _____

SHIPPING NOTIFICATIONS E-MAIL: _____

ELECTRONIC INVOICING E-MAIL: _____

OWNER(S) _____ PHONE: _____ EMAIL: _____

BUSINESS INFORMATION (PLEASE MARK THE BUSINESS TYPE(S) THAT BEST DESCRIBE YOUR ORGANIZATION)

☐ BRAND/MANUFACTURER ☐ COLLEGE BOOKSTORE ☐ FLY SHOP ☐ SPECIALTY RETAILER ☐ DEPT. STORE/ GEN. RETAIL
☐ WEB SALES ☐ RESORT/GIFT SHOP ☐ GOLF/PRO SHOP ☐ BREWERY/WINERY/DISTILLERY

CREDIT CARD PAYMENT AUTHORIZATION

AS THE CARDHOLDER, I AUTHORIZE RICHARDSON HEADWEAR TO CHARGE THE CREDIT CARD ACCOUNT NUMBER BELOW FOR ORDERS THAT HAVE BEEN/WILL BE SHIPPED TO US.

NAME ON CARD: _____

CREDIT CARD NUMBER: _____

EXPIRATION DATE: _____

BILLING ADDRESS OF CARDHOLDER: _____

ZIP CODE: _____

AUTHORIZED SIGNATURE OF ABOVE CARDHOLDER: _____

SIGNATURE

DATE

I THE UNDERSIGNED, PLEDGE THAT ALL INFORMATION LISTED ABOVE IS CORRECT AND TO PAY ALL DEBTS ACCORDING TO THE TERMS SET FORTH IN THE INVOICE. I AGREE TO PAY A 1 1/2% PER MONTH FINANCE CHARGE ON ALL INVOICES 30 OR MORE DAYS PAST DUE. IN THE EVENT THAT ANY COLLECTION PROCEEDINGS ARE REQUIRED AGAINST MY ACCOUNT, I AGREE TO PAY 33 1/3% OF BALANCE OWED TO OFFSET LEGAL FEES AND/OR COLLECTION FEES. IF A SUIT IS BROUGHT, VENUE MAY BE LAID IN THE COUNTY AND STATE OF RICHARDSON HEADWEAR'S CHOICE. I RECOGNIZE THAT UPON ISSUANCE OF CREDIT BY RICHARDSON HEADWEAR THAT ALL TERMS AND CONDITIONS OF THIS APPLICATION SHALL CONSTITUTE AN AGREEMENT OF SALE. I ALSO AUTHORIZE THE CONTACT OF THE ABOVE LISTED TRADE AND BANK REFERENCES AS WELL AS THE APPROVAL TO ACQUIRE BUSINESS INFORMATION, CREDIT REPORTS, AND IF A SOLE PROPRIETOR, A PERSONAL CREDIT REPORT.

OWNER OR OFFICER OF COMPANY PLEASE SIGN BELOW:

PRINT NAME

SIGNATURE

DATE

IF YOUR ACCOUNT IS NOT GRANTED OPEN TERMS, YOU MAY CHARGE BY VISA/MASTERCARD/AMERICAN EXPRESS.



PO BOX 71130 Springfield, OR 97475 ■ Phone: 1-800-545-8686 Fax: 1-800-451-9203 ■ www.richardsonsports.com

**FOR OFFICE USE ONLY**

Acct# _____
Credit Approved: _____
Limit: \$ _____
Credit Denied: _____
Date: _____

Credit Application/Agreement

Firm Name: _____ ASI #: _____

Billing Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____ E-mail: _____

Type of Business:

☐ Corporation

☐ LLC

☐ Partnership

☐ Proprietor

Date Business Established _____ Number of Employees _____

Desired Credit Limit _____ Estimated Annual Purchases from Richardson _____

Ownership

Principal Name: _____ Title: _____

Home Address: _____ S.S. #: _____

Principal Name: _____ Title: _____

Home Address: _____ S.S. #: _____

Trade References

1. Business Name: _____ Contact: _____ Acct. No. _____

Email(preferred): _____ Phone/Fax: _____ Current Credit Limit _____

2. Business Name: _____ Contact: _____ Acct. No. _____

Email(preferred): _____ Phone/Fax: _____ Current Credit Limit _____

3. Business Name: _____ Contact: _____ Acct. No. _____

Email(preferred): _____ Phone/Fax: _____ Current Credit Limit _____

Bank Reference

Name: _____ Contact: _____

Phone No: _____ Fax No: _____ Acct. #: _____

I the undersigned, pledge that all information listed above is correct and to pay all debts according to the terms set forth in the invoice. I agree to pay a 1 1/2 % per month finance charge on all invoices 30 or more days past due. In the event any collection proceedings are required against my account, I agree to pay 33 1/3 % of balance owed to offset legal fees and/or collection fees. If a suit is brought, venue may be laid in the county and state of Richardson Sports, Inc.'s choice. I recognize that upon issuance of credit by Richardson Sports, Inc. that all terms and conditions of this Application shall constitute an agreement of sale. I also authorize the contact of the above listed trade and bank references as well as the approval to acquire business information credit reports and if a sole proprietor, a personal credit report. Owner or officer of company please sign below

(Print Name)

(Title)

(Signature)

(Date)

If your account is not granted open terms, your orders will be shipped C.O.D. or you may charge by Visa/MasterCard/American Express.

RICHARDSON®

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