



APPLICATION AND AGREEMENT FOR CREDIT

(Credit Application MUST be completed in full and signed)

3040 Northwoods Pkwy.
Norcross, GA 30071
1-888-387-5437
Email customerservice@uskidsgolf.com

Legal Company Name _____ County _____ Sales Tax# _____

Address _____ City _____ State _____ Zip _____

Contact _____ Telephone (____) _____ Fax (____) _____

E-Mail _____ Facility Name _____

Buying Group _____ Group # _____

Federal ID# _____ Business Type: Corporation Proprietorship Partnership Subsidiary

Business Type: Public Private Semi-Private Resort Military Driving Range Off Course Non Profit Other

Bill to Name _____ Telephone (____) _____ Fax (____) _____

Address _____ City _____ State _____ Zip _____

AP Contact _____ Telephone (____) _____ Fax (____) _____

E-Mail _____ Prefer Invoices sent via: E-Mail Fax U S Mail

Ship to Name _____ Telephone (____) _____ Fax (____) _____

Address _____ City _____ State _____ Zip _____

Contact _____ Telephone (____) _____ Fax (____) _____

Third Party Shipping # (if applicable) _____ Shipping Carrier (for Thrid Party #) _____

(If you do not provide a third party shipping number all packages will be shipped via FedEx)

Sales Contact _____ Telephone (____) _____ Fax (____) _____

E-Mail: _____ PGA Member# _____ PGA Retirement Plus: Yes No

FINANCIAL INFORMATION:

Date Established _____ # of Employees _____ Annual Sales \$ _____

NAME OF PRINCIPAL OFFICER/OWNER:

Name _____ Title _____ Telephone (____) _____

Residence Address _____ City _____ State _____ Zip _____

CREDIT REFERENCES – INDUSTRY RELATED: (Must Include 1 Major credit card)

ACCOUNT	ACCOUNT #	BAL\$	TELEPHONE #	FAX #
1) _____	_____	_____	(____) _____	(____) _____
2) _____	_____	_____	(____) _____	(____) _____
3) _____	_____	_____	(____) _____	(____) _____

CREDIT CARD: (For use on initial order & if account becomes delinquent, balance will be charged and subject to 18% service charge)

(Visa, MC, Amex, Disc) Account # _____ CVV# _____ Exp date _____ Card Holder Name _____

NAME OF BANK _____ ACCOUNT # _____ CONTACT NAME _____

ADDRESS _____ TELEPHONE (____) _____ FAX (____) _____



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PERSONAL GUARANTY: (Required for businesses less than 3 years old; or no credit history established)

I, _____ (Authorized Person), residing at _____ (Home Address) for and in consideration of U.S. Kids Golf, LLC extending credit at my request to _____ (Customer Company Name), of which I am _____ (Title), hereby personally guarantee to U.S. Kids Golf, LLC the payment of any obligation of the Company and I hereby agree to bind myself to pay U.S. Kids Golf, LLC on demand any sum which may become due to U.S. Kids Golf, LLC by the Company whenever the Company shall fail to pay the sum. It is understood that this guaranty shall be a continuing and irrevocable guaranty and indemnify for such indebtedness of the Company. I do hereby waive notice of default, non-payment and notice thereof and consent to any modification or renewal of the credit agreement hereby guaranteed.

SIGNATURE _____ SOCIAL SECURITY # _____

CREDIT POLICY FOR CHARGE ACCOUNTS:

Upon approval of this application, it is agreed that all purchases will be paid in full and in accordance with the terms of sale as stated on U.S. Kids Golf, LLC invoice(s). Should the undersigned not pay U.S. Kids Golf, LLC according to terms, it is understood that credit privileges may be withdrawn and deliveries withheld. In the event that U.S. Kids Golf, LLC finds it necessary to obtain assistance in order to collect any outstanding account, the undersigned agrees to pay all reasonable legal fees and expenses including, without limitation, any court costs or expenses arising in connection with same. Further, the undersigned agrees that delinquent accounts may be converted to a cash payment basis and, in the sole discretion of U.S. Kids Golf, LLC, may be subject to a service charge on past-due amounts equal to the lesser of eighteen percent (18%) per annum or the maximum amount permitted by law. If a check is returned to U.S. Kids Golf, LLC by the Customer's bank for non-sufficient funds, a charge invoice of \$30.00 will be issued to the Customer. The Customer is required to replace the NSF check plus the \$30.00 charge with cash or certified check.

The above information is warranted to be true. In support of this application, U.S. Kids Golf, LLC is hereby authorized to obtain credit and/or financial information from the bank(s) and other credit reporting organizations or commercial firms with whom the undersigned have/has done business. It is understood that any such credit and/or financial information will be full, true and complete disclosure in connection with the matters referred to in this Application and Agreement for Credit and supporting documents. Your credit and the personal credit of any personal guarantor will be used in making credit decisions. You authorize us to investigate your creditworthiness by obtaining credit reports and making other inquiries as we deem appropriate. You also agree that we may report your performance under this agreement to credit bureaus and others who may lawfully receive such information.

To secure payment and performance of all obligations, Customer hereby grants U.S. Kids, Golf a continuing purchase money security interest in all inventory, equipment, and goods manufactured by or distributed by U.S. Kids, Golf whenever sold, consigned, leased, rented or delivered, directly or indirectly, to or for the benefit of Customer by U.S. Kids, Golf, wherever located, now owned and hereafter acquired including but not limited to all U.S. Kids, Golf brand, and all replacement parts, accessories and supplies including repossessions, and returns; and all proceeds from the sales, lease or rental thereof; and all existing or subsequently arising accounts and accounts receivable, all books and records, and supporting obligations which may from time to time hereafter come into existence during the term of this Security Agreement. U. S. Kids, Golf's purchase money security interest is explicitly limited to outstanding obligations between U.S. Kids, Golf and Customer.

RESALE CERTIFICATE(S) (Except AK, DE, MT, NH, & OR)

A copy of the resale certificate for EACH ship-to location must be attached to this form or application will not be honored

The undersigned have/has read and fully understand(s) the above credit policy.

FIRM NAME _____

PRINT NAME _____ TITLE _____

SIGNATURE _____ DATE _____

Internal Use Only

Current Acct# _____ New Acct# _____ Credit Limit: _____

Inside Rep: _____ ESR #1: _____ % _____ GROUP: _____

Territory# _____ Division: _____ Sales Region# _____ Profit Center: _____

Customer Discount Group: _____ Discount: _____ Terms: _____

Comments: _____