

Tel: +44 915942041 [INFO@TRADINGSTARS.UK](http://www.aureliagloves.co.uk/)

30 Westgate, Leeds, West Yorkshire, LS21 3AS

**Trading Stars Application Form**

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| --- | --- |
| Business Name  |  |
| Invoice Address  |  |
| Delivery Address (if different to the above)  |  |
| Company Registration Number  |  |
| VAT Number  |  |
| Credit Limit Required Payment terms 30 days EOM  |  |
| Estimated Annual Spend  |  |
| Year Business Established  |  |
| Telephone Number  |  |
| Fax Number  |  |
| Email Address  |  |
| Accounts Contact  |  |
| Name of Partnership (if sole trader or partnership)  |  |
| Home Address of Partnership (if sole trader or partnership)  |  |
| Authorised Signature of Applicant  |  |
| Date  |  |
| Printed Name of Authorised Signatory  |  |
| Position within Business  |  |

**By completing this form, you are giving consent to us holding the above information for our business use only.**

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Credit Account or Pro-Forma Account (please tick the box that applies to you)