Callaway Footwear New Account Application

KLONE LAB, LLC- CG LICENSEE

115A WATER STREET, NEWBURYPORT, MASSACHSETTS 01950

CALLAWAYSHOES@KLONELAB.COM

978-378-3434 / Fax 978-378-3435

Date		Rep Name		Credit Limit Requested	
On Course		Off Course		Other	

State Sales Tax Exemption #		DUNS#	

BILL TO INFORMATION:

Legal Business Name			
DBA Name			
Address			
City		State	
Phone		Zip	
Website			

SHIP TO INFORMATION:

Store/Course Name			
Address			
City		State	
Phone		Zip	
Other			

If you have Multiple Ship To Address Please Send List

AP Contact		Buyer	
Telephone		Telephone	
Email		Email	

Owners/Principles

Name		Name	
Title		Title	
Phone / Fax#		Phone / Fax#	

Would you like us to ship the product using OUR Freight Account and add charges to your Invoice?		Yes or No
Or Would you like us to use YOUR OWN Freight Account? If Yes, please UPS# or FEDEX#		

ALL FIELDS ARE REQUIRED FOR ACCOUNT ACTIVATION

CREDIT DEPARTMENT WILL ESTABLISH CREDIT LIMIT AND TERMS UPON REVIEW

INVOICES ARE EMAILED TO AP CONTACT EMAIL ADDRESS (Ony One)

PLEASE ATTACH STATE SALES TAX EXEMPTION CERTIIFICATE