

IN ORDER TO PROCESS YOUR ORDER KINDLY FAX OR EMAIL THIS FORM TO  
REVO CUSTOMER SERVICE AT 212 683 0437 OR GOLFORDERS@REVO.COM.  
**ONLY AFTER THIS INFORMATION IS RECEIVED WILL YOUR ORDER BE PROCESSED.**

LEGAL NAME OF CLUB: \_\_\_\_\_ D/B/A: \_\_\_\_\_

BUSINESS ADDRESS (SHIPPING): \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

BILLING ADDRESS (IF DIFFERENT THAN ABOVE): \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

BUYER NAME: \_\_\_\_\_ BUYER EMAIL: \_\_\_\_\_

**LIST OF ALL OWNERS, PARTNERS OR CORPORATE OFFICERS:**

NAME	TITLE	SOC. SEC. #	BIRTHDAY
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

FEIN#: \_\_\_\_\_

RESALE# \_\_\_\_\_

MANAGER: \_\_\_\_\_

ACCOUNTS PAYABLE NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

AP CONTACT EMAIL: \_\_\_\_\_

**BUSINESS INFORMATION**

TYPE OF PRODUCT SOLD: \_\_\_\_\_ NUMBER OF STORE LOCATIONS: \_\_\_\_\_

MAJOR COLLECTIONS CARRIED: \_\_\_\_\_

PROPRIETORSHIP: \_\_\_\_\_ PARTNERSHIP: \_\_\_\_\_ CORPORATION: \_\_\_\_\_

YEAR BUSINESS ESTABLISHED: \_\_\_\_\_ LENGTH OF TIME AT PRESENT LOCATION: \_\_\_\_\_

BANK: \_\_\_\_\_ ACCT #/NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_ BANK CONTACT: \_\_\_\_\_

**CREDIT REFERENCES (NAME / ADDRESS / PHONE):**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

THE UNDERSIGNED AGREES TO PAY FOR ALL PURCHASES ACCORDING TO THE TERMS OF CREDITOR. NO TERMS OR CONDITIONS OF PURCHASE  
ORDERS DIFFERENT FROM THE TERMS OF CREDITOR WILL BECOME PART OF ANY SALES AGREEMENT, PURCHASE ORDER, OR OTHER DOCUMENT  
UNLESS SPECIFICALLY APPROVED IN WRITING BY CREDITOR. NO ITEMS WILL BE ACCEPTED FOR RETURN WITHOUT PRIOR APPROVAL.

THE UNDERSIGNED HEREBY CERTIFIES THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

DATE: \_\_\_\_\_ COMPANY: \_\_\_\_\_

PRINT OWNER OR AUTHORIZED AGENT: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_