



# House Account Application

Customer Name:		
Business (House Account) Name:		
Home (Billing) Address:		
City:	State:	ZIP:
Business Phone:	Home Phone:	
Fax:	E-Mail:	

Name of individual(s) authorized to charge purchases: (other than Customer listed above)	
1.	Phone:
2.	Phone:
3.	Phone:

Credit Card to be billed: <input type="checkbox"/> AMEX <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA	
Issuing Name:	Expiration:
Billing Address:	
Account Number:	
<b>Cardholder Full Name:</b>	

Customer will be sent a statement of charges at the end of each month. The Customer acknowledges responsibility to pay an amount equal to the total of all purchases and charges reflected on the statement, whether incurred by the Customer or by an individual authorized by the Customer above. As designated above, Customer authorizes charging the Customer's credit card or will pay by Customer check. Charges to a Customer's card will be made automatically on the statement date (on the 5<sup>th</sup> day after the statement date). Check payments must be received by the Center within 10 days of the statement date, as indicated above, or the Center will charge the amount due to the Customer's credit card.

In the event that a charge is rejected or a check is returned for any reason, Customer agrees to make full and prompt payment immediately upon receipt of notice. Customer is responsible for and will reimburse any fees or charges incurred by the Center as a result of a rejected charge or returned check. This credit card authorization does not constitute an agreement to provide, nor is it intended to imply the existence of, any extension of credit or any credit options. The Center may, at its discretion, restrict charges on this House Account in general or with respect to any type of products and/or services. The Center may also cancel this agreement at any time for any reason by giving written notice to the Customer, at which time all amounts then outstanding are due and payable immediately.

<b>Customer Signature:</b> X	<b>Date:</b>
<b>Printed Name:</b>	<b>Title:</b>
<b>Driver's License #:</b>	<b>State:</b>