

APPLY FOR YOUR GRAND & TOY BUSINESS DISCOUNT CARD TODAY.

Please fill out this application and fax it to Brian Houston at 1-519-739-1446.



ACCOUNT APPLICATION FORM

COMPANY INFORMATION

(TO BE COMPLETED IN FULL)

PLEASE PRINT CLEARLY IN INK

CUSTOMER NAME (Business and Legal Names)

SHIP TO ADDRESS: (If different from mailing address)

INVOICE MAILING ADDRESS

DELIVERY ADDRESS

ADDRESS LINE 2

ADDRESS LINE 2

CITY PROV POSTAL CODE

CITY PROV POSTAL CODE

ATTENTION

SPECIAL DELIVERY OR ORDER INSTRUCTIONS

ADDITIONAL INFORMATION

CONTACT NAME FOR PAYMENTS		TELEPHONE NUMBER ()	FAX NUMBER ()	EMAIL ADDRESS
CONTACT NAME FOR ORDERS			TELEPHONE NUMBER ()	ESTIMATED ANNUAL PURCHASES FROM G&T
CONTACT NAME FOR SHIPMENT			TELEPHONE NUMBER ()	NO. OF EMPLOYEES THIS LOCATION OFFICE TOTAL
PROPRIETORSHIP <input type="checkbox"/>	PARTNERSHIP <input type="checkbox"/>	INCORPORATED <input type="checkbox"/>	TYPE OF BUSINESS/SIC NO.	ARE YOU INTERESTED IN E-INVOICING? YES <input type="checkbox"/> NO <input type="checkbox"/>
DATE BUSINESS STARTED	PARENT CO. NAME	AFFILIATED COMPANIES IF ANY	GRAND & TOY ACCOUNT NO.	NO. OF ACCOUNT CARDS REQUIRED
				ARE P/Os MANDATORY FOR ALL PURCHASES? YES <input type="checkbox"/> NO <input type="checkbox"/>

TRADE REFERENCE INFORMATION

1) COMPANY NAME	ACCOUNT NUMBER	CONTACT PERSON	TELEPHONE NUMBER ()	FAX NUMBER ()
2) COMPANY NAME	ACCOUNT NUMBER	CONTACT PERSON	TELEPHONE NUMBER ()	FAX NUMBER ()
3) COMPANY NAME	ACCOUNT NUMBER	CONTACT PERSON	TELEPHONE NUMBER ()	FAX NUMBER ()

BANK INFORMATION

BANK NAME	CONTACT PERSON	TELEPHONE NUMBER ()
BRANCH ADDRESS	DATE ACCOUNT ESTABLISHED	ACCOUNT NUMBER

OWNER INFORMATION

NAME	TITLE	HOME TELEPHONE NUMBER ()
RESIDENCE ADDRESS	CITY	PROVINCE POSTAL CODE

OWNER IDENTIFICATION (Please provide at least two of the following for identity verification)

1. DRIVER'S LICENCE NUMBER	PROVINCE	2. DATE OF BIRTH (M/D/Y)	3. SOCIAL INSURANCE NUMBER (OPTIONAL)
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CREDIT CARD PAYMENT OPTION

CARDHOLDER NAME (Please Print)	CREDIT CARD TYPE: VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMERICAN EXPRESS <input type="checkbox"/> DINERS CLUB/EN ROUTE <input type="checkbox"/>	CARD NUMBER	EXPIRY DATE (M/Y)
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I/We request that all purchases on the Grand & Toy account hereby applied for be billed to the above credit card number.

I/We understand that any purchases declined by the credit card company will be charged back to our Grand & Toy account.

CARDHOLDER SIGNATURE _____ ACCEPTED ON (DATE): _____

ACCOUNT AGREEMENT (Terms and Conditions)

THE UNDERSIGNED HEREBY: (a) Certifies the information contained in all parts of this document to be correct and requests that a charge account and identification cards be issued by **GRAND & TOY LIMITED** ("Grand & Toy") to the Customer; (b) Understands that all charge card(s) remain the property of Grand & Toy; (c) Accepts responsibility for the security and confidentiality of the account number and card(s); (d) Accepts responsibility for their use; (e) Agrees to report immediately all lost or stolen cards to the nearest Grand & Toy location; (f) Accepts as notice in writing of and consents to the obtaining of credit and/or any other information as may be required at any time in connection with the account hereby applied for and to the disclosure of any credit information concerning the Customer and/or principals with any credit reporting agency, credit bureau or any person or corporation with whom the Customer has or proposes to have financial relations; (g) Understands that the terms of sale are as stated on all invoices; (h) Agrees to a monthly finance charge of 2.4% (28.8% per annum) calculated on any amount not paid by the due date; (i) Agrees to pay a \$25.00 service charge for any cheques returned unpaid by the bank for any reason; (j) Understands that all merchandise shall remain the property of Grand & Toy until the account has been paid in full; (k) Understands that all returned and accepted merchandise is subject to restocking charges. Grand & Toy reserves the right to withhold shipments to customers that do not meet these terms.

The undersigned warrants that he/she has read and accepts the terms and conditions noted above.

CUSTOMER'S SIGNATURE	PLEASE PRINT NAME	TITLE	DATE
OFFICE USE ONLY SALES UNIT	ORIGINATED BY ACCOUNT NUMBER	CREDIT LIMIT AUTHORIZED SIGNATURE	DATE APPROVED