



NEW ACCOUNT APPLICATION

Setup for GEAR ____ CCP ____ Both ____

The following Customer hereby applies for Credit from GFSL, Inc. and/or its subsidiaries and agrees and represents as follows:

Bill To Name: _____ Ship To: _____

Address: _____ Address: _____

City: _____ State: _____ City: _____ State: _____

County: _____ Zip+4: _____ County: _____ Zip+4: _____

Accounts Payable Contact: _____ Email Invoices to: _____

Telephone: _____ Fax: _____ Email: _____

Purchasing Agent Contact: _____ Email Order Acknowledgements to: _____

Telephone: _____ Fax: _____ Email: _____

Years in Business: _____

Check the following that applies: Partnership ____ Proprietorship ____ Corporation ____ Private ____ Public ____ Franchised ____

Bank: _____ Account Number: _____

Phone: _____ Contact: _____

Please provide four active trade references:

Name	Account Number	Address	Phone
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1. _____

2. _____

3. _____

4. _____

Are you willing to pay cash in advance to expedite shipment? ____ Yes ____ No Request Credit Limit: _____

Do you want to receive a copy of the order acknowledgment? ____ Yes ____ No

Do you want pricing information printed on the packing list? ____ Yes ____ No

Do you want Product ID numbers on the packing list? ____ Yes ____ No

Sales Tax: ____ Taxable ____ Exempt If exempt, complete attached tax form and/or attach exemption certificate for each state shipped to. Tax will be charged unless a tax exemption certificate is attached.

IMPORTANT: Please enclose a copy of your latest financial statement. This is vital to help us correctly assign a credit line to your business. Credit Terms and Conditions must be signed (page 4).

The following information to be completed by Sales Rep:

Ship Date of the Order: _____ Amount: _____

Sales Agency Name: _____ Number: _____

Sales Rep Name: _____ Number: _____

Customer Service Rep: _____ Number: _____

Customer Class: Bookstore Retail Resort Specialty Retail Hotel/Gaming/ Entr. Golf Corporate Sports Spec Military Sec. Markets

Sales Tax: ____ Taxable ____ Exempt. If exempt, please see page 3 Exemption Form.

Ship Via/Carrier: _____ Order Confirmation Required: ____ Yes ____ No

(Pages 1 and 4 are mandatory to process Credit Application. Pages 2 and 3 are conditional.)

9700 Commerce Parkway, Lenexa, Kansas 66219-2402 913-693-3200

IMPORTANT:

Please enclose a copy of your latest financial statement. This is vital to help us correctly assign a credit line to your business.
Your signature is required to make this application valid.
Thank you again for your cooperation.

INDIVIDUAL GUARANTEE OF CORPORATION'S OR LIMITED LIABILITY COMPANY'S ACCOUNT

To GEAR for Sports, Inc. and its subsidiaries CC Products, Inc. and Event 1, Inc. (collectively "GFSI")

In consideration of the extension of credit granted by GFSI, to _____ (Corporate Customer), I hereby personally, individually and unconditionally guarantee payment of whatever amount which at any time shall be owing to GFSI, on account of goods delivered, after the date hereof. This is a continuing guarantee relating to any indebtedness, including that arising under successive transactions, which shall either continue the indebtedness or from time to time to renew it after it has been satisfied and this guarantee shall be perpetual as to any indebtedness incurred before written notice is received by GFSI, that I am unwilling to guarantee any additional indebtedness on this account. I understand and agree to pay a 1.5% per month delinquency and finance charge applied to any balance outstanding 30 days or more, computed on a daily basis. Delinquency and finance charge will not, however exceed the maximum allowed by state or federal law.

Dated: _____

(In signing do not use corporate title)

(Individual)

(Residence Address)

(Social Security Number)

(Phone)

(Spouse must also sign)

INDIVIDUAL GUARANTEE OF SOLE PROPRIETORSHIP'S OR PARTNERSHIP'S ACCOUNT

To GEAR for Sports, Inc. and its subsidiaries CC Products, Inc. and Event 1, Inc. (collectively "GFSI")

In consideration of the extension of credit granted by GFSI, to _____ (Name of Account) I hereby personally, individually and unconditionally guarantee payment of whatever amount which at any time shall be owing to GFSI, on account of goods delivered, after the date hereof. This is a continuing guarantee relating to any indebtedness, including that arising under successive transactions, which shall either continue the indebtedness or from time to time to renew it after it has been satisfied and this guarantee shall be perpetual as to any indebtedness incurred before written notice is received by GFSI, that I am unwilling to guarantee any additional indebtedness on this account. I understand and agree to pay a 1.5% per month delinquency and finance charge applied to any balance outstanding 30 days or more, computed on a daily basis. Delinquency and finance charge will not, however exceed the maximum allowed by state or federal law.

Dated: _____

(Please print)

(Proprietor or Principal)

(Signature)

(Proprietor or Principal)

(Residence Address)

(Social Security Number)

(Phone)

(Spouse must also sign)

Dated: _____

(Please print)

(Proprietor or Principal)

(Signature)

(Proprietor or Principal)

(Residence Address)

(Social Security Number)

(Phone)

(Spouse must also sign)

UNIFORM SALES & USE TAX EXEMPTION/RESALE CERTIFICATE — MULTIJURISDICTION

The below-listed states have indicated that this certificate is acceptable as a resale/exemption certificate for sales and use tax, subject to the notes on pages 2—4. The issuer and the recipient have the responsibility to determine the proper use of this certificate under applicable laws in each state, as these may change from time to time.

Issued to Seller: _____

Address: _____

I certify that

Name of Firm (Buyer): _____

Address: _____

is engaged as a registered

☐ Wholesaler

☐ Retailer

☐ Manufacturer

☐ Seller (California)

☐ Lessor (see notes on pages 2—4)

☐ Other (Specify) _____

and is registered with the below-listed states and cities within which your firm would deliver purchases to us and that any such purchases are for wholesale, resale, or ingredients or components of a new product or service¹ to be resold, leased, or rented in the normal course of business. We are in the business of wholesaling, retailing, manufacturing, leasing (renting) selling (California) the following.

Description of Business: _____

General description of tangible property or taxable services to be purchased from the Seller: _____

State	State Registration, Seller's Permit, or ID Number of Purchaser	State	State Registration, Seller's Permit, or ID Number of Purchaser
AL ¹		MO ¹⁶	
AR		NE ¹⁷	
AZ ²		NV	
CA ³		NJ	
CO ⁴		NM ^{4,18}	
CT ⁵		NC ¹⁹	
DC ⁶		ND	
FL ⁷		OH ²⁰	
GA ⁸		OK ²¹	
HI ^{4,9}		PA ²²	
ID		RI ²³	
IL ^{4,10}		SC	
IA		SD ²⁴	
KS		TN	
KY ¹¹		TX ²⁵	
ME ¹²		UT	
MD ¹³		VT	
MI ¹⁴		WA ²⁶	
MN ¹⁵		WI ²⁷	

I further certify that if any property or service so purchased tax free is used or consumed as to make it subject to a Sales or Use Tax we will pay the tax due directly to the proper taxing authority when state law so provides or inform the Seller for added tax billing. This certificate shall be a part of each order that we may hereafter give to you, unless otherwise specified, and shall be valid until canceled by us in writing or revoked by thee city or state.

Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.

Authorized Signature: _____

(Owner, Partner, or Corporate Officer)

Title: _____

Date: _____

Credit Terms and Conditions

Promise to Pay. You will receive an invoice for each purchase you make using your Account. You agree to pay the entire amount of each purchase order according to the terms of the billing invoice by the Payment Due Date as stated on the invoice. If a dispute arises you will not withhold payment. Instead, you will withhold the disputed portion of the balance; the remaining undisputed balance will be remitted when the invoice comes due.

Terms: An open account of net 30 days is not guaranteed by the receipt of this application. If open account is approved, invoices are due 30 days from the invoice date.

If you change your address, you must notify us of this change within 10 working days by mail to GFSI, Inc., 9700 Commerce Parkway, Lenexa, KS 66219. ATTN: Credit Department or email to changeofaddress@gfsiinc.com.

If there is a change of ownership or control of the company, you agree to notify us within 10 working days by overnight letter or by registered letter. We will not accept any form of payment which contains any limitations or conditions on payment such as short paid checks noted as representing payment in full of a disputed balance.

Line of credit. Your line of credit may increase or decrease from time to time. Such changes will be made at the sole discretion **GEAR for Sports, Inc. and its subsidiaries CC Products, Inc. and Event 1, Inc. (collectively "GFSI")** and no advanced notification is promised or implied.

If your account is past due, orders may be held at **GFSI** sole discretion.

Collection related issues. If **GFSI** must refer your delinquent account to an attorney, you agree to pay all reasonable attorneys' fees, court costs and other collection costs in connection with **GFSI** collection efforts.

Returned Check Charges. A \$25 charge will be assessed on returned checks, which agree to pay.

Privacy. By signing this Application you agree to allow **GFSI** to verify your credit references and bank references and instruct these references to provide reasonable assistance and information to **GFSI**.

You agree that any person signing this application on your behalf has the actual authority to do so and to bind you to the terms and conditions listed.

RETURN POLICY

Plain Goods Returns

- All returns of plain goods are subject to a restocking fee up to 20%.
- No returns for plain goods will be accepted past 30 days of receipt.
- All returns must have a "Return Authorization" issued by the Credit Services Department. Any items returned to **GFSI** not authorized by a return authorization will be forfeited to **GFSI**.
- Sample must be obtained for defective merchandise that exceeds \$700.

Decorated Goods Returns

- Returns and discounts will be allowed only for defective goods.
- Notification of returns must be made within 60 days of receipt.
- All returns must have a "Return Authorization" issued by the Credit Services Department. Any items returned to **GFSI** not authorized by a return authorization will be forfeited to **GFSI**.
- Sample must be obtained for defective merchandise that exceeds \$700.

Please contact the Credit Services Department for authorization of all discounts and returns at (toll free) 1-877-442-4377 *Central Standard Time* or fax to 913-693-3928.

I UNDERSTAND AND AGREE TO THE ABOVE TERMS:

(Print Name of Business)

Print or type name of Principal or Officer

Title

Signature for Company

Date

For Internal Use Only:

Account Number: _____

MIA Number: _____

Authorized by: _____

Date Authorized: _____

Payment Terms: _____

Credit Limit: _____

Market Manager: _____

Customer Type: _____

Sales Management./Administration Approval: _____

Date: _____

Comments: _____