

DRYMAX SPORTS

Distributed by Hickory Brands, Inc.
429 27th Street NW
Hickory, NC 28601
800/465-0806 Phone
800/422-3279 Fax
drymaxsports.com



APPLICATION FOR CREDIT
(PLEASE PRINT OR TYPE)

DRYMAX SPORTS LLC USE ONLY:

APPROVED DENIED
ACCT # _____
LIMIT \$ _____
REVIEWED BY _____

ORDER ATTACHED YES NO

TO START A NEW ACCOUNT TO ESTABLISH CREDIT TERMS FOR CURRENT COD ACCOUNT

(PLEASE PROVIDE A PHOTO COPY OF YOUR RESALE CERTIFICATE)

WHAT WILL BE YOUR APPROXIMATE MONTHLY CREDIT NEEDS FROM DRYMAX? \$ _____

FULL LEGAL NAME OF FIRM _____ RESALE # NC ACCOUNTS _____

DBA _____ ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

TELEPHONE # _____ / _____ - _____ FAX # _____ / _____ - _____ (PLEASE INCLUDE +4) # OF STORES _____

E-MAIL: _____ WEB SITE: _____

TYPE OF ENTITY

PROPRIETORSHIP PARTNERSHIP CORPORATION YEAR OF INCORPORATION _____

STATE OF INCORPORATION _____ D&B # _____ FEDERAL TAX I.D. # _____

YEARS UNDER PRESENT OWNER _____ YEARS AT CURRENT ADDRESS _____

FRANCHISE YES _____ NO _____ OWN OR RENT SPACE

LANDLORD _____ PHONE _____ / _____ - _____

CHECK TYPE OF RETAIL BUSINESS: SPORTING GOODS ATHLETIC FTWR SHOE STORE RUNNING TENNIS

DEPT STORE OUTDOOR SKI GEN. MERCH. WEB MAIL ORDER CLOTHING PRO SHOP SHOE REPAIR

BUYING GROUP MEMBERSHIP: ADA NBS TAG SPORTS INC. WORLDWIDE DIST.

HAVE YOU EVER FILED BANKRUPTCY? YES NO

IF YES, UNDER WHAT BUSINESS NAME? _____ YEAR FILED _____

NAMES & ADDRESSES OF PROPRIETORS, PARTNERS, OR CORPORATE OFFICERS:

1) NAME/TITLE _____ YEARS WITH COMPANY _____

ADDRESS _____

2) NAME/TITLE _____ YEARS WITH COMPANY _____

ADDRESS _____

3) NAME/TITLE _____ YEARS WITH COMPANY _____

ADDRESS _____

BANK REFERENCE (PLEASE INCLUDE ACCOUNT NUMBERS):

BANK NAME _____ CHECKING ACCOUNT # _____

ADDRESS _____ TELEPHONE # _____ / _____ - _____

BANK CONTACT _____

CREDIT REFERENCES:

NAME _____ ACCOUNT # _____ PHONE # _____ / _____ - _____

NAME _____ ACCOUNT # _____ PHONE # _____ / _____ - _____

BUSINESS REFERENCE (CHECK ACTIVE ACCOUNTS ONLY):

FILA NIKE VANS TIMBERLAND SKETCHERS BROOKS _____

NEW BALANCE REEBOK TEVA PUMA SAUCONY K-SWISS _____

HI-TEC ADIDAS MIZUNO AVIA ASICS ROCKPORT _____

TERMS ARE NET 30 DAYS IF CREDIT IS APPROVED. CUSTOMER WILL BE RESPONSIBLE FOR ALL SURCHARGES INCURRED ON ACCOUNT.

I have been given, and have read and understand the terms and conditions set forth by DRYMAX LLC. I further understand I will be charged a rate of 1 1/2% per month (18% per annum) on all past due balance and shall pay any collection cost, including reasonable attorney fees. Furthermore, I give permission for Drymax/Hickory Brands, Inc. and business references listed above to share vital financial information about myself and my company listed above.

We furnish the above information for your consideration as basis of extending credit to us. We believe that our firm is financially able to meet any commitments we have made and we expect to pay your invoices according to your terms.

AUTHORIZING SIGNATURE _____ TITLE _____ DATE _____ / _____ / _____

*COPY OF A CURRENT FINANCIAL STATEMENT WILL HELP FACILITATE CREDIT APPROVAL.

PRINTED NAME _____ (over) © Copyright 2007, DRYMAX LLC (drymax credit app.qxd)

INDIVIDUAL PERSONAL GUARANTEE

I, _____,
residing at _____,
for and in consideration of your extending credit at my request to
_____ (herein referred to as the
(NAME OF COMPANY)
"Company"), of which I am _____, hereby personally guarantee
(TITLE)
to you, DRYMAX LLC payment of an obligation of the company and I hereby
agree to bind myself to pay you on demand any sum which may become due
to you by the company whenever the company shall fail to pay the same.
It is understood that this guarantee shall be a continuing and irrevocable
guaranty and indemnity for such indebtedness of the company. I do hereby
waive notice of default, non-payment and notice thereof and consent to any
modification or renewal of the credit agreement hereby guaranteed.

Signature: _____ Date ____/____/____
(PRESIDENT / CEO / OWNER)

Witness: _____ Date ____/____/____
SIGNATURE

Name: _____
PLEASE PRINT

Address: _____

City, State, Zip: _____