



RAINCOAST BOOKS, 9050 Shaughnessy Street, Vancouver, British Columbia V6P 6E5  
 Canadian toll-free phone: 1-800-663-5714 • Canadian toll-free fax: 1-800-565-3770  
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Telebook SAN #S1150871  
 Envoy user name: raincoast  
 Business services: <http://services.raincoast.com>

**PREPAID TERMS ACCOUNT APPLICATION SALES CONTACT:** \_\_\_\_\_

Company name: \_\_\_\_\_  
 Legal name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

**NAMES AND TITLES OF PRINCIPAL OFFICERS**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Purchasing Agent: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 A/P Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Do you want backorders? Yes  No

Backorders held until they reach a minimum of \$80.00 net for shipping: Yes  No

Backorders held until they reach the \$400.00 net for free shipping: Yes  No

*\*Please be aware that backorders or dated product can ship at any time.*

**ORDER PROCEDURE**

Orders may be placed by telephone, letter, purchase order or order form via mail or fax. Please specify ship date, if required. All merchandise will be shipped FOB Raincoast Books' warehouse in Vancouver, British Columbia, via ground motor freight unless otherwise specified.

I/we the undersigned hereby agree and understand that this application is for the purpose of obtaining a "Prepaid Terms" account with Raincoast Book Distribution Ltd. All sales and/or invoices are processed as a "Payment by Bank Card in Advance of Shipment" basis only. It is further understood that no NET 30, NET END OF MONTH FOLLOWING or other trade terms are represented, implied, or provided in this application.

I/we authorize Raincoast Books and/or its agents to process charges for shipments as required, including backorders as they become available, to the credit card listed at the bottom of this application.

Signing Officer (Please print): \_\_\_\_\_  
 Position: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Rep Name: \_\_\_\_\_

**CREDIT CARD DETAILS:** Visa  Mastercard  No Cheques Accepted

Expiry: \_\_\_\_\_  
 Name of Cardholder: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Signature of Cardholder: \_\_\_\_\_