

DMI Fundraising
CREDIT APPLICATION & AGREEMENT TO PAY

Instructions

1. All fields are required
2. Representatives 1 & 2 must be from separate households
3. A minimum of one business trade reference is requested
4. Fax credit application with order form to 219-465-1356
5. Allow 1-2 business days for approval

ORGANIZATION INFORMATION

Organization name:

Phone:

Fax:

E-mail:

Registered organization address:

City:

State:

ZIP Code:

Date organization commenced:

Federal Taxpayer Id Number:

State Tax Exemption Id Number:

REPRESENTATIVE #1 INFORMATION

Representative #1 Name & Title:

Date of Birth:

SSN:

Phone:

Current Address:

City:

State:

ZIP Code:

Email:

Current Employer:

Phone:

Employer Address:

City:

State:

ZIP Code:

REPRESENTATIVE #2 INFORMATION

Representative #2 Name & Title:

Date of Birth

SSN:

Phone:

Current Address:

City:

State:

ZIP Code:

Email:

Current Employer:

Phone:

Employer Address:

City:

State:

ZIP Code:

ORGANIZATION BANKING INFORMATION

Bank name:

Bank Address:

Phone:

City:

State:

Zip Code:

Type of account

Name on Account & Account number

Checking

Other

ORGANIZATION BUSINESS/TRADE REFERENCES

Company name:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

Type of account:

Company name:

Address:

City:

State:

ZIP Code:

Phone:

Fax:

E-mail:

BUSINESS/TRADE REFERENCES CONTINUED

Type of account:		
Company name:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:

Type of account:

CREDIT APPLICATION & AGREEMENT TO PAY

In consideration of D.M. of Indiana, Inc., d/b/a DMI Fundraising, granting credit to the Organization specified above which is placing this order, by its undersigned Authorized Agent, the Organization agrees to the following: The Organization agrees to pay in full all unpaid balances within twenty (20) days after date of invoice. In the event that the Organization does not pay all unpaid balances within thirty (30) days after date of invoice, it is understood and agreed that a late fee of \$39.00 will be charged, and in addition a finance charge in an amount of up to 1.5% per month. If collection proceedings, arbitration, or legal action is initiated to collect any portion of the account, the Organization agrees to pay all collection, arbitrator, and attorneys fees and all costs incurred by DMI Fundraising, including any attorney fees incurred in making demand for payment, as well as for filing and pursuing legal remedies, including any appeal.

This application and agreement is made in and shall be governed by the law of the State of Indiana. In any legal action between DMI Fundraising and the Organization (customer), each of them consents to and confers jurisdiction and preferred venue upon the courts of general jurisdiction of Porter County, Indiana, for all purposes relative to such action and agrees that the venue of such action may be changed from such county only upon the agreement of all parties to such action. Customer further agrees to accept service of process in such action by certified mail, return receipt requested. At the address specified in the Order Form and to acknowledge the receipt thereof in writing.

By signing this application for credit and agreement to pay, the Organization hereby authorizes DMI to obtain credit information from any of the persons or firms listed on this application and from any other source. The individuals signing below on behalf of the Organization warrants that they are authorized by proper action of the Organization to sign this agreement, and that all necessary action to bind the Organization has been taken and done.

Personal Guaranty

In consideration of the granting of credit to the Organization, by DMI Fundraising at the request of the undersigned and in reliance on this guaranty, the undersigned hereby guarantees the payment of the amounts due from the Organization to DMI Fundraising, and the undersigned promises to pay all of the costs and fees incurred by DMI Fundraising in enforcing this guaranty and in enforcing the Organization's promise to pay DMI Fundraising, including attorney fees and all other costs of collection. DMI Fundraising's forbearance, delays, extensions of time to pay or any other reason whether similar to or different from the foregoing shall not release the undersigned from liability as guarantor.

SIGNATURES

----- Signature of Representative #1 Title: Date:	----- Signature of Representative #2 Title: Date:
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Return Credit Application to:
DMI FUNDRAISING
319 E 316 N SUITE F
VALPARAISO IN 46383

(800) 628-5905 TOLL FREE
(219) 465-1356 FAX
(219) 464-9956 LOCAL