



QUICK CHARGE CUSTOMER ACCOUNT APPLICATION

PO Box 830769, Richardson, TX 75083-0768 • Tel: 972-231-7227 • Fax: 972-231-0623

Please return this completed form to: tpnnewaccounts@thomasprintworks.com

BUSINESS INFORMATION

Type of business: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other:			Industry:	
Business name:				
Billing address:		City:	State:	Zip:
Delivery address:		City:	State:	Zip:
Phone:	Fax:		Email:	
Contact name:		How long at this address?	Date business opened:	
Full name of owner/president:				

CREDIT CARD INFORMATION *Card will be kept on file to process invoice upon billing.*

Type of Card: <input type="checkbox"/> Visa <input type="checkbox"/> AmEx <input type="checkbox"/> Discover <input type="checkbox"/> MasterCard			Cardholder name:	
Credit card #		CVV code:	Exp. date:	
Signature:		Printed name:		Date:

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I understand that the information furnished on this application is for the purpose of opening a Quick Charge Customer Account. To the best of my knowledge, the information given is true and correct. I have read the Terms and Copyright License Indemnification Agreement and agree to them as stated.

Further, I authorize Thomas Printworks to charge the credit card tied to this account as payment for work ordered by us and produced by Thomas Printworks. A \$4.50 non-refundable processing fee will apply to all charges. This amount can be subject to change without notice.

Signature of person making application:	Title:	Date:
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ACCOUNT INFORMATION *Thomas Printworks Use Only*

Account name:	Account #
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