

ReadyCare NEW ACCOUNT SETUP FORM FOR U.S. BUSINESS CUSTOMERS

Please use this online editable form to open a new Please allow 2 business days from receipt for review	ReadyCare business account. No signature is required if completed online. and account setup. Questions: (800) 477-4283.
Date (mm/dd/yy) Sales Rep	
SECTION 1: GENERAL INFO	•
Company Name	Business Type Corporation Proprietorship
Main Phone# Main Fax#	Partnership LLC Other Federal ID #
Billing Address	Shipping Address
City Zip	City Zip
Primary Contact	Accts Payable Contact
Name	Name
Title	Title
Phone	Phone
Email	Email
Primary Contact	Accts Payable Contact
Name	Name
Title	Title
Phone	Phone
Email	Email
Payment Options (select one)	Company Background
Credit Card Pre-Payment (complete Section	
Wire Pre-Payment (skip to Section 3) Check Pre-Payment (skip to Section 3)	Yrs w/Present Mgmt Website
Net 30 Terms (complete Section 2b)	vvebsite
Tax-Exempt Status	Reseller Status
Yes No (include copy of certific	ate) Yes No (include copy of certificate)
Tax-Exempt #	Resale Certificate #
SECTION 2A: FOR CREDIT CARD PREPA	YMENT
Type of Credit Card Visa Mastercard	AMEX Card Billing Address
Name on Card	
Card Number	City
Exp Date (mm/yy) Security Code	State Zip



SECTION 2B: FO	OR NET 30 TERMS					
Bank Name			Account #			
Address			Bank Officer Name			
City			Phone			
State	Zip		Email		Zip	
Commercial Refere	ences (3 Required)					
Company Name #1			Company Name #2			
Contact			Contact			
Phone			Phone			
Address			Address			
City			City			
State			State			
Company Name #3			Company Name #4			
Contact			Contact			
Phone			Phone			
Address			Address			
City			City			
State			State			
SECTION 3: SPE	ECIAL INSTRUCTION					
Purchase Order R			Other Special Instruc	tions (Des	scribe)	
Accept Truck Deli	very Yes	No		,		
Lift Gate Needed		No				
Inside Delivery Re	equired Yes	No				
principal, director or officer of are an authorized user of this of otherwise. If you selected Ne company, you, individually, joincluding reasonable attorney writing by delivery to Ready C Care Industries' receipt of the	cluding your name and title below, you a the company with the authority to make credit card, and you are providing permis at 30 Terms, you authorize Ready Care pointly or severally, guarantee the payment of sees and all costs and other expense care Industries at 15845 E. 32nd Ave, Su	his authorization. If you selected p sion to Ready Care Industries to ch to inquire about your company's fii t of any and all future obligations of sincurred by Ready Care Industrie ite 2A, Aurora, CO 80011, via certi e venue for any suit arising out of	re-payment by credit card, you veri narge this credit card for the amoun nancial and business relationships of your company which may be ow es in collecting any indebtedness. If the mail, but such revocation will be this agreement shall be, in addition	ify the accuracy t due on your cu and credit histored to Ready Ca This is a continuo e effective only on to any place	any as outlined on this form, and you are a of the credit card information provided, you rrent order and future orders until instructed ory. As a principal, director or officer of the ire Industries, or its affiliates, upon demanding guarantee and may be revoked only in as to transactions entered into after Ready allowed by law, Adams County, Colorado. attorney's fees, costs and expenses.	
I Agree	Authorizer's Name				(Must be a corporate officer)	
	Authorizer's Title					
• Save completed form and email it to your acct manager or info@readycare.com • Print completed form and fax to ReadyCare at (800) 456-6721						







ReadyCare is a leading provider of personal care amenities, supplies and private label solutions to world-class hotels, spas, health clubs and golf clubs. For over 25 years, Denver-based ReadyCare has helped thousands of properties deliver great member and guest experiences by ensuring their personal care offering aligns with their brand and their customers.

