

WAXING POETIC®

Date: ___/___/___

Rep: _____

Show: _____

Requested Ship Date: ___/___/___

DEALER ACCOUNT SETUP/CHANGE FORM

Company Name	
DBA	
Bill to Address, City, State, Zip	
Ship to Address, City, State, Zip	
Website address	
Email address	
Business Phone	
Fax Number	
Owner's Information	Name: _____ Phone: _____
	Email: _____
Buyer or Main Contact's Information	Name: _____ Phone: _____
	Email: _____
Store Locator Address - If more than one, please list all locations.	

Please Check Opening Package:

\$1,500 Promotional Package
 \$5,000 Promotional Package
 Other (please see attached order form)

Notes:	

Additional Information (optional)

How did you hear about Waxing Poetic?	
Are you a member of the Jewelers Board of Trade? If so, what is your number?	
What are the top 3 lines in your store?	
How many Square Feet is your store?	
How many employees do you have?	
How do you market your store (print, radio, cable, social media)?	

Email or fax completed form to sales@waxingpoetic.com or 775-593-2803



WAXING POETIC®

Credit Card On File Form

Please complete the following form in order to keep a credit card on file for order processing

Store Name: _____

Store Address: _____

Store Phone: _____ Store Email: _____

Default Credit Card:

VISA _____ MasterCard _____ American Express _____ Discover _____

Credit Card #: _____ Exp. Date: _____ Security Code: _____

Cardholder Name: _____

CC Billing Address: _____

CC Billing City: _____ State: _____ Zip: _____

Back-Up Credit Card:

VISA _____ MasterCard _____ American Express _____ Discover _____

Credit Card #: _____ Exp. Date: _____ Security Code: _____

Cardholder Name: _____

CC Billing Address: _____

CC Billing City: _____ State: _____ Zip: _____

I hereby authorize Pagliei Collection, Inc, DBA Waxing Poetic to automatically charge the Default credit card listed above for payment of charges to my account and the Back Up credit card to be charged automatically if the Default declines for any reason. *Card will only be charged at time of shipment for inventory available.*

This form will be kept on file and will remain in effect until the expiration of the credit card account.

Applicants may also revoke this form by submitting a *written request* to sales@waxingpoetic.com. A new form must be submitted if Credit Cards on file are no longer valid or if information such as the expiration date is amended.

Cardholder Signature: _____ **Date:** _____

Please note: Any orders submitted with Seasonal Promotional Offers by Waxing Poetic including Net Payment Terms will be honored and the credit cards on file will NOT be charged prior to processing. Customer is responsible for remitting payment by the agreed upon due date.