



Thank you for your interest in becoming a dealer with Paintball Body Bags. We are confident that you will be impressed with the quality of both the Super Body Bag and Mega Body Bag.

Both the Super and Mega Body Gear Bags have these qualities. Made with ballistic fabric, Rubber corner supports, Metal bottom pegs, Industrial zippers, Industrial hooks, Long neck zipper handles, Double stitching, Cushioned shoulder supports, Heavy duty foam inserts, Heavy Duty Plastic trays, information holder, Lock and Key, Mesh top pocket, 2 large side pockets, 1 large front pocket, Wide open top, breaks down easily for storage, and (Heavy duty large rollers - Mega only)

Mega (34"L x 14-½"W x 15"H)

Super (35"L x 11"W x 14"H)

To establish a positive business relationship all new accounts will be required to pay for the first two orders by card. CODs will be accepted upon approval after the first two orders.

Along with the completed dealer application & Uniform Sales & Use Tax Certificate, please return a copy of your business license, copy of voided check, and a picture of your facility and or field as asked for on page 2 of the application. Please note that the sales and use tax form is imperative if you wish to purchase Paintball Body Bags. It is not the same as your tax license or ID. Please do not simply send in a copy of your state sales and use tax permit, it will not be accepted. Once all requisites are received and processed, you will be contacted by one of our knowledgeable sales representatives.

Please submit all information by email, fax, or shipping service using the following contact information.

Paintball Body Bags  
193 Ben Burton Circle  
Bogart, GA 30622



## Dealer Application

### Registered As:

Corporation    LLC    Sole Proprietorship    Partnership    Franchise

### Business Information:

Name of Company: \_\_\_\_\_ Date Established: \_\_\_\_\_

Registered Business Name (d.b.a): \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Phone #: \_\_\_\_\_ Business Fax #: \_\_\_\_\_

Website: \_\_\_\_\_

Business Email: \_\_\_\_\_

Purchasing Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

Finance Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

### Type of Business:

Internet Retailer    Pro-shop    Outdoor Field    Indoor Field

Sporting Good Store    Hobby Store    Surplus Store    Home Based

Other (explain): \_\_\_\_\_



## Dealer Application

### Shipping Address:

Business Shipping Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Business Owner Information:

Owner's Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

### Preferred Method of Payment:

- Credit Card       C.O.D. (Available after 2 orders have been completed with payment up front)

### Required Documents:

- Photocopy of your resale license or business license
- Photocopy of your tax identification certificate
- Photocopy of a voided check with your business name
- Photocopy of your store front / field / warehouse



## Dealer Application

### Dealer Locator:

We offer a Dealer Locator page on our website; upon reaching \$1,000 in purchases (per year) your account will become eligible to be listed in this section of our website. Please provide your store information as you would like it to appear on the website:

Name of Store: \_\_\_\_\_

Store Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Store Phone #: \_\_\_\_\_ Toll Free Phone #: \_\_\_\_\_

Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

Store Website: \_\_\_\_\_

Business Email: \_\_\_\_\_

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Signature of Partner (if applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Please mail or fax application and required documents to the following address:

Paintball Body Bags  
193 Ben Burton Circle  
Bogart, Georgia 30622  
(706)208-1951 fax



## Dealer Application

### Marketing Information:

Where do you advertise? \_\_\_\_\_

\_\_\_\_\_

What is your monthly spending? \_\_\_\_\_

What do you usually stock? \_\_\_\_\_

\_\_\_\_\_

What percentage of your orders are drop-shipments? \_\_\_\_\_

What is your average busy time yearly? \_\_\_\_\_

What is your average slow time yearly? \_\_\_\_\_

What are your major sellers? \_\_\_\_\_

\_\_\_\_\_

What items do you push the most? \_\_\_\_\_

\_\_\_\_\_

What has slowed down in sales? \_\_\_\_\_

\_\_\_\_\_

Who are your major paintball suppliers? \_\_\_\_\_

\_\_\_\_\_

Who is your major competition? \_\_\_\_\_

What paintball teams do you sponsor? \_\_\_\_\_

Who is your general customer? \_\_\_\_\_

How do you plan on marketing the bag? \_\_\_\_\_

\_\_\_\_\_



## Dealer Application

### Applicant Agrees To:

- a) All merchandize sold to applicant shall remain property of Paintball Body Bags until paid for in full.
- b) If collection action is necessary, Paintball Body Bags may recover attorney's fees plus other collection expenses incurred.
- c) Any claim of damaged or missing goods must be reported within 48 hours of receipt of the order. Damage for shipping must be reported directly to the carrier and to a sales representative of Paintball Body Bags.
- d) Paintball Body Bags is not liable for incidental or consequential damages.
- e) Applicant will be charged a restocking fee of 25% of the gross sales price for any refused shipments or the return of any non-defective merchandise.
- f) Any product returned without an authorization number will be refused. Products returned that do not qualify for a credit or refund will be returned at the applicant's expense.
- g) Applicant agrees to advertise products at the allowed MAP price (Minimum Advertised Price).
- h) Applicant agrees to pay a drop-shipment fee for order shipped to address other than the shipping address provided on this application.
- i) Shipping charges are non refundable
- j) All prices/policies are subject to change
- k) Applicant agrees to the charges placed on there card account for items ordered.
- l) The parties agree that this agreement shall be governed by and construed and enforced in accordance with the substantive laws of the state of Georgia. Further the parties irrevocably consent the jurisdiction of the Courts of Georgia (Federal and/or state). The parties waive trial by jury.
- m) If any provision of this Agreement shall be or shall become illegal or unenforceable in whole or in part, for any reason whatsoever, the remaining provisions shall be deemed valid, binding and subsisting.

### Personal Guarantee:

Each of the undersigned hereby confirms the accuracy of the information given by them and agrees to all terms and conditions set forth by Paintball Body Bags. The individual signing this agreement expressly warrants and represents that he or she has authority to act on behalf of, and to legally bind, Merchant.

\_\_\_\_\_  
Officers/Owner's Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Officers/Owner's Name (printed)

\_\_\_\_\_  
Phone Number



## Dealer Application

### Credit Card Authorization Form:

I \_\_\_\_\_ HEREBY: Authorize Paintball Body Bags to use the following card information for payment of all orders placed by myself the owner of the account assigned to the card and authorized buyers I assign to place orders in my absence.

#### Primary Card Information:

Card Type:  Visa  Amex  Discover  MasterCard

Primary Card #: \_\_\_\_\_ Exp (mm/yy): \_\_\_\_\_

#### Bill to Address Information:

Company Name: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

\_\_\_\_\_  
Card Holder's Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

#### Secondary Card Information:

Card Type:  Visa  Amex  Discover  MasterCard

Secondary Card #: \_\_\_\_\_ Exp (mm/yy): \_\_\_\_\_

#### Bill to Address Information:

Company Name: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

\_\_\_\_\_  
Card Holder's Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date



## Dealer Application

### Authorized Buyers Information:

Buyer #1: \_\_\_\_\_ Title: \_\_\_\_\_

Buyer #2: \_\_\_\_\_ Title: \_\_\_\_\_

Buyer #3: \_\_\_\_\_ Title: \_\_\_\_\_

After completing this form please email or fax in a copy of the front and back of both the primary and secondary card that will be used to place orders and a copy of a government issued ID of the account holder of the cards.