



MASTERLINK CLUB STAFFING SERVICES, (A DIVISION OF)
8793 Tamiami Trail E. Suite 208, Naples, FL 34113 (941) 775-5300/Fax (941) 775-6398
Email: staffing@masterlinkinc.com / Website: www.masterlinkinc.com

CREDIT APPLICATION

Club Name _____ Federal ID # _____

Subsidiary / Division of _____

Street Address _____ City _____ State _____ Zip _____

Telephone (_____) _____ Fax (_____) _____

Email Address _____ Website _____

Legal Name (if different from above) _____

*Billing Address _____ City _____ State _____ Zip _____

*(Where invoices should be mailed if different from above.)

Number of Branches (if any) _____ Years Established _____

Business Type: Corporation _____ Partnership _____ Individual Owner _____

Club Type _____

Principal(s) / Owner(s) _____ SS # _____

_____ SS# _____

Accounts Payable Manager _____

BANK CREDIT REFERENCES

Bank Name _____ Bank Name _____

Address _____ Address _____

City _____ State _____ Zip _____ City _____ State _____ Zip _____

Telephone (_____) _____ Telephone (_____) _____

CHECKING ACCT# _____ CHECKING ACCT# _____

TRADE CREDIT REFERENCES

COMPANY NAME _____

TELEPHONE (_____) _____ CREDIT DEPT. FAX (_____) _____

COMPANY NAME _____

TELEPHONE (_____) _____ CREDIT DEPT. FAX (_____) _____

CUSTOMER AGREEMENT

PLEASE READ AND SIGN – keep a copy for your records. Thank you.

I, the undersigned, acknowledge and understand the following:

1. Payment Terms are **Net 10 Days** from Invoice Date (at the rate noted on our rate sheet; subject to change) unless otherwise noted and approved.
2. The above information is for purposes of obtaining credit and is warranted to be accurate and true.
3. My signature below authorizes all parties stated in references above to release necessary information to **Masterlink Club Staffing Services**, including but not limited to banking information.
4. If credit is extended, the company named as applicant will be responsible for paying One and One Half Percent (1 ½%) (or the highest legal rate) finance charge per month on delinquent accounts and the recovery of reasonable collection and attorney fees (not to exceed forty percent (40%) in the event the account is turned over for collections.
5. Customer acknowledges that **MasterLink Club Services, Inc.** insurance does not cover claims of **MasterLink Club Services, Inc.** employees under the Jones Act, damage to, or loss of Customers owned, non-owned or leased vehicles (including contents and cargo machinery, equipment or material) while being used by or in the care, custody or control of **MasterLink Club Services, Inc.** employees, and that **MasterLink Club Services, Inc.** does not assume liability for claims of **MasterLink Club Services, Inc.** employees under the Jones Act.
6. Customer assumes and agrees to indemnify and hold harmless **MasterLink Club Services, Inc.** from any claims for bodily injury, (including death) or loss of, or loss of the use of, or damage to property arising out of the use or operations of Customers owned, on-owned or leased vehicles, machinery or equipment by **MasterLink Club Services, Inc.** employees, and from any claims of or on behalf of employees brought under or by virtue of their employment as a seamen or as a member of the crew of any vessel.
7. The undersigned acknowledges receipt of a copy of this credit agreement.

Please note: We cannot obtain banking credit information without an authorized signature. Please print clearly. Thank you.

Principal/Owner and/or

Authorized Representative: _____ **Signature:** _____