

Flathead Investment Club

ANNUAL RENEWAL & PREFERRED VENDOR APPLICATION

Annual Preferred Vendor Member (Check to be held pending approval) \$200.00

Note: Your annual renewal occurs on April 1st each year regardless of the date of application & acceptance.

Referred by (Name of Member):

Business Information:

Legal Company Name			Type of Business		
Trade Name (Business Name)		E-mail address		Business Telephone Number ()	
Billing Address	City	State	Zip	Fax Number ()	
Delivery Address	City	State	Zip	Mobile Number ()	

Owner(s) or Partner(s) Name(s):

First Name	Middle Initial	Last Name	Title	E-mail address	
Residence Address			City	State	Zip
			Telephone Number ()		
First Name	Middle Initial	Last Name	Title	E-mail address	
Residence Address			City	State	Zip
			Telephone Number ()		
First Name	Middle Initial	Last Name	Title	E-mail address	
Residence Address			City	State	Zip
			Telephone Number ()		

References:

Name of Bank		Name of Bank Officer			
Address	City	State	Zip	Telephone Number ()	
Trade Reference		Contact			
Address	City	State	Zip	Telephone Number ()	
Customer Reference		Contact			
Address	City	State	Zip	Telephone Number ()	
Customer Reference		Contact			
Address	City	State	Zip	Telephone Number ()	

