



HUMAN KINETICS, INC.
CUSTOMER CREDIT APPLICATION

Dear Prospective Customer,

Thank you for your inquiry to purchase from Human Kinetics Inc. Human Kinetics leads the world in providing information related to physical activity. That information takes many forms, from textbooks and their ancillaries, consumer books and journals, to online courses, software and audio-visual products. The information touches the lives of millions of people worldwide who are interested in some form of physical activity, including college students and professors, personal trainers, rehabilitation specialists, athletes, coaches, physical educators, nutritionists, parents, and sedentary people who want to become active.

All prospective customers must meet certain qualifications in order to acquire credit. Our customer credit application must be completed and signed. Please provide sales tax information at time of application or sales tax will be included on all purchases (where applicable).

HK will process your application and notify you of credit status as quickly as possible. Please allow 1-2 weeks processing time under normal circumstances. The more information furnished to Human Kinetics with your application, the quicker it can be processed. If you need an order before the credit process is completed we accept Visa, MasterCard, and American Express. We also accept money orders, and checks drawn on U.S. banks in U.S. funds.

Please complete the following Customer Credit Application and return it to Human Kinetics. Missing information may result in extension of turnaround time for approving your application.

We look forward to a successful partnership!!

Human Kinetics, Inc.

A/R Credit and Collections Department
217-351-5076 Ext. 2920
Fax: 217-351-1549
AR@hkusa.com

**CUSTOMER APPLICATION
ACCOUNT INFORMATION**

Account Number _____
(If available)

Please fax, mail, or e-mail completed application, bank and account information to:
HUMAN KINETICS ATTN: A/R Credit and Collections Dept.
1607 North Market Street * P.O. Box 5076 * Champaign, IL 61825-5076
Tel: (217) 351-5076 **Fax:** (217)351-1549 **Email:** AR@hkusa.com
Website: http://www.humankinetics.com

1. BUSINESS INFORMATION

If supplying information on your own form please fill out, sign request for bank credit information (Page 3),
AND SIGN THE BOTTOM OF PAGE 4

Legal Business Name _____ FEIN # _____ D & B # _____

DBA _____ Phone# _____ Fax # _____

Contact Person: _____ Title: _____

Street Address _____ City _____ State _____ Zip _____

Additional Locations - Please attach list.

Years in business under current ownership _____ E-mail address _____

Form of Organization: Proprietorship _____ Partnership _____ Corporation _____ LLC _____ Non-Profit _____

Type of Business: Wholesaler _____ Bookstore _____ Educational _____ Online Store _____ Catalog _____

Medical _____ Instructor _____ Government _____ College Owned Bookstore _____ Other _____

Name, Title, Phone, & E-mail Address of Principals/Officers

Do any unsatisfied Judgments exist? ___Yes ___No Have you ever-filed Bankruptcy ___Yes ___No (if YES, Please attach explanation)

SALES TAX RESALE CERTIFICATE NUMBER (MANDATORY) _____ STATE: _____

ATTACH COPY OF CERTIFICATE/SALES TAX EXEMPT FORM TO THIS APPLICATION

2. Trade References –List 3 or more with at least six (6) months of activity and for products not services (credit cards and utilities not acceptable)

Pearson Education Upper Saddle River NJ Fax: 201-256-0000

McGraw-Hill Columbus OH Fax: 614-755-5645

John Wiley & Sons Somerset NJ Fax: 732-302-2201

Random House Westminster MD Fax: 410-386-7439

Lippincott Williams & Wilken Philadelphia PA Fax: 215-521-8552

Company: _____ E-Mail: _____ Credit Dept. Fax: _____

Company: _____ E-Mail: _____ Credit Dept. Fax: _____

Company: _____ E-Mail: _____ Credit Dept. Fax: _____



Human Kinetics Inc.
 1607 N. Market St.
 P.O. Box 5076
 Champaign, IL 61825-5076
 Tel: 217-351-5076
 Fax: 217-351-1549

REQUEST FOR BANK CREDIT INFORMATION

COMPLETED BY CUSTOMER

Bank Name: _____
 Address: _____

 Fax: _____

Please provide Human Kinetics Inc. with information on my:

Checking Account# _____
 Line of Credit Account# _____
 Other Account # _____

This information is requested for use in the extension of credit for business purposes only. It will be held in the strictest of confidence.

I hereby authorize the release of the information below to Human Kinetics Inc.

 (Business Name and Address)

 (Signature of Applicant)

COMPLETED BY HK

Customer is requesting/we are inquiring for:

1. New Account Credit 2. Increase to credit limit 3. Reestablish

Inquiry by: _____
 Title: _____
 Date: _____

COMPLETED BY BANK

Our Experience with this account:

Depository Accounts:

- Business Account
 Personal Account

Date(s) Opened: _____
 Average Balance: _____
 High Balance: _____
 # Of times NSF in last 6 months: _____
 If foreign Bank, Currency type: _____

Account rating: Good Fair Poor

 (Signature)

Comments: _____

 (Title)

 (Date)

THANK YOU for your cooperation

Human Kinetics Account Information

- § Credit is subject to approval. Terms and limit will be set at time of approval.
- § All payments must be made in United States funds drawn on a United States banking institution.
- § Payments by MasterCard, Visa, or American Express are accepted with the following required information: card number, expiration date, name on card, billing address, and telephone number.
- § Account terms are from invoice date. Credit hold may be placed on any past due account. Human Kinetics reserves the right to change any open account to prepay at any time.
- § A service charge will be applied to the account for any check returned by the bank for any reason. The account will be on credit hold until payment via certified check, money order, or credit card (including service charges) is received.
- § I/We understand that Human Kinetics must be notified in writing of any change in ownership, the name of the business or structure of the business under which credit is established.
- § In the event payment is not made and our account is referred to a collection agency, we will pay all attorneys' fees resulting from such action.

Purchase Orders/Placing an Order:

Fax: 217-351-1549
Phone: 800-747-4457
Mail: 1607 N. Market St.
P.O. Box 5076
Champaign, IL 61825-5076
Email: Orders@hkusa.com

Remittance Address:

§ Please remit payment to our lockbox:
Human Kinetics Inc
9224 Paysphere Circle
Chicago, IL 60674

Shipping:

- § Unless otherwise instructed by the customer, all orders are shipped within 2 working days via UPS, FedEx, or motor freight providing account is in good standing.

Backorders:

- § HK will supply or cancel backorders at your preference. Unless notified otherwise, backorders will be automatic for all qualifying titles. Customer is responsible for shipping costs associated with backorders.
- § All backorders are cancelled after 6 months.

Return Policy:

- § Permission not necessary
- § Not before 3 months or after 12 months from invoice date
- § Address for return shipments:
Human Kinetics, Inc.
Returns Department
1607 N. Market St.
Champaign, IL 61825-5076
- § Books returned in non-resalable condition will not receive credit. These books will be kept for 30 days awaiting your UPS call tag. Your credit memo number must be referenced on the call tag.
- § Full credit (excluding shipping/handling) for books returned with invoice information
- § Books returned without invoice information receive 47% of list price

Damaged, Short/Incorrect Shipments or, Non-Receipt, Discount Questions:

- § Claims must be made within 14 days from the date of invoice
- § Please contact Customer Service to resolve your claim via:

• **Phone: 800-747-4457**

• **Fax: 217-351-1549**

• **Email : info@hkusa.com**

Statement, Sales Tax, Account Status Questions:

- § Please contact Accounts Receivable:

• **Phone: 800-747-4457**

• **Fax: 217-351-1549**

• **Email : ar@hkusa.com**

The preceding information is for the purpose of obtaining credit and is warranted to be true. I/We hereby authorize Human Kinetics Inc. to investigate all references and customary credit information sources regarding my/our credit and financial responsibility. Applicant's signature attests financial responsibility, ability and willingness to pay in accordance with above terms.

Signature _____ **Print** _____ **Date** _____