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| OFFICE USE ONLY. ENTERED BY: |
| STAFF: _____ |
| DATE: _____ |
| ACCT #: _____ |

1290 FEWSTER DRIVE, MISSISSAUGA, ON L4W 1A4
TEL: (905) 602-9622 FAX: (905) 602-8262
WEBSITE: WWW.MCCALLS.CA EMAIL: ORDERING@MCCALLS.CA

BUSINESS ACCOUNTS APPLICATION FORM

McCall's Bakers Warehouse is a wholesale cash and carry warehouse for trade customers. Please complete and return this form along with a copy of a valid business license in order to set up an account. The completed form can be mailed, faxed or emailed to the above. Please allow 2 business days to process.

We accept Cash, Debit, Visa, MasterCard, PayPal

Business Number: _____

****NOTE** A COPY OF A VALID BUSINESS LICENSE MUST BE INCLUDED WITH APPLICATION.**

Company Name: _____

Address: _____ City: _____

Prov: _____ Postal Code: _____ Phone: (____) _____ Fax _____

Signing Officer/Owner's Name: _____ Email: _____

Contact Name(if different from above): _____ Email: _____

Type of Business: _____ How long in business? _____

In order to access business level pricing online, a valid email address must be provided:

Main Email Address for account set-up: _____

Yes, sign me up for Sweetlines eNewsletter for monthly specials, new products and more! McCall's will not give or sell your information and you can unsubscribe at any time.

TERMS & CONDITIONS

No returns on any food product, chocolate, chocolate molds or seasonal products. All other returns will have an applicable 20% restocking fee. Returns must have a valid RMA number and must be accompanied with original invoice within 7 days of purchase. Cheque privileges may be granted. Orders may be **Phoned-in/Faxed/Emailed or placed online.** Orders for pick up or for shipping will be processed within 2 business days. Same day rush orders will incur a **\$10.00 rush sur-charge.** Credit terms are available to business customers with a minimum yearly sales of \$5,000.00. No credit terms will be processed/approved from October thru to December. **I have read and fully understand and accept the above terms and conditions, and certify that all the above information provided by me is correct.**

Signed: _____ Date: _____



HOW DID YOU HEAR ABOUT MCCALLS?

Please select ONE

- | | |
|---|---|
| <input type="checkbox"/> School Brochure | <input type="checkbox"/> Student/School |
| <input type="checkbox"/> Club Membership | <input type="checkbox"/> Sweetlines |
| <input type="checkbox"/> Existing Customer | <input type="checkbox"/> Trade Show |
| <input type="checkbox"/> Friends/Family | <input type="checkbox"/> Website |
| <input type="checkbox"/> Internet Search Engine | <input type="checkbox"/> Word of Mouth |
| <input type="checkbox"/> Magazine | <input type="checkbox"/> Yellow Pages |
| <input type="checkbox"/> Newspaper | |