



Return completed application to the campus bookstore.

CREDIT APPLICATION

Please provide the following credit information and the proper signature authorizing the release to Follett Higher Education Group, Inc. ("Follett") of the credit information necessary to establish and administer a credit account with your Follett bookstore. Any and all information and data you provide in conjunction with the application, including student financial aid information, will be kept confidential and used only as a basis for granting and administering credit under the account(s) applied for below (the "Accounts"). By signing below, you represent and warrant that you are authorized to enter into this Agreement with Follett on behalf of the applicant (company) named below.

APPLICANT INFORMATION:

APPLICANT NAME (Legal Entity & Department):
CONTACT NAME: CONTACT PHONE:
CONTACT FAX: CONTACT EMAIL:
BILLING ADDRESS: ATTN:
CITY: STATE: ZIP CODE:
TAX ID (FEIN):
TAX EXEMPT STATUS: Y N (circle one)

IF YES:

TAX EXEMPT ID NUMBER Must provide a copy of Sales Tax Exempt Certificate. If no tax-exempt certificate is on file with the store, tax will be charged on all purchases made to account.

AUTHORIZED CHARGERS: Individuals below are authorized to charge to this account. If additional space is required, indicate below and attach documentation. If this information is not provided for any student, that student must bring a voucher signed by an authorized representative of the Applicant with them to the store to make purchases. Applicant will be solely responsible for reimbursing Follett for any purchases pursuant to such vouchers, and costs of any collection efforts.

- 1. Name: Student ID: Charge Amount:
2. Name: Student ID: Charge Amount:
3. Name: Student ID: Charge Amount:
4. Name: Student ID: Charge Amount:
5. Name: Student ID: Charge Amount:
6. Name: Student ID: Charge Amount:
7. Name: Student ID: Charge Amount:
8. Name: Student ID: Charge Amount:
9. Name: Student ID: Charge Amount:
10. Name: Student ID: Charge Amount:

AUTHORIZED PURCHASES:

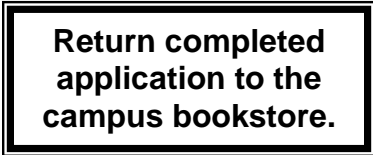
Check if authorized to purchase and note charge limit, if applicable:

- TEXT ONLY - CHARGE LIMIT:
ALL ITEMS - CHARGE LIMIT:

STATEMENT AND MATERIALS:

Applicant will receive the standard statement, which consists of Authorized Changer's name, transaction date, transaction reference and transaction amount. Applicants may receive any of these reports in addition to that statement:

- Itemized receipt of transacted purchases
Signed customer copies of receipts



ADDITIONAL AUTHORIZATIONS

Initial and date next to agree or disagree for each of the additional authorization options:

_____ **Agree**
_____ **Disagree**

Rental:
If the account is for a Bulk Rental Program, the Applicant must provide the following information along with the submission of this Application: (1) The name of the student or group of students authorized to rent and (2) the corresponding charge limit amount for each type of authorized rental. The applicant guarantees payment to Follett Higher Education Group for any unreturned rental books, damaged/lost/stolen charges, plus any and all unreimbursed applicable fees as outlined in the Rental Agreement.

_____ **Agree**
_____ **Disagree**

Late Finance Charge:
Upon approval of the Applicant's application, Applicant agrees to be bound by the following terms of credit governing the Accounts. Applicant will receive a statement each month for charges made to its Accounts by Authorized Chargers. Payment is due net thirty days from date of statement. Disputes on any invoice must be reported to Follett within thirty days from the statement date. Late payments will be subject to a monthly Finance Charge of 1.5%. Follett may place all or any one of the Applicant's accounts on hold in the event late payment, and pursue collection for delinquent balances. To the extent permitted by applicable law, the Applicant will be liable for any costs and attorneys' fees incurred by Follett as a result of such collection. The laws of the State of Illinois will govern this Agreement.

_____ **Agree**
_____ **Disagree**

References
Applicant authorizes its bank and trade references to provide information to Follett and credit reporting agencies to release any necessary credit reports to Follett for purposes of considering this application. At Follett's request, Applicant will provide Follett with a statement of its financial condition. Applicant further authorizes Follett to use any information provided by the Applicant pursuant to this Agreement for the purpose of administering the Applicant's Account(s).
Bank Name _____
Account _____

_____ **Agree**
_____ **Disagree**

Account Charger Changes
Applicant is responsible for any and all Authorized Purchases including Bulk Rental and Alternate Collateral Processes made by an Authorized Charger, regardless of any change in the Authorized Charger's employment or financial aid eligibility or enrollment status, unless Applicant has notified the bookstore in writing in advance of the purchases that the Authorized Charger is no longer authorized to make purchases on the Account.

AUTHORIZATION AND AGREEMENT TO CREDIT TERMS

Applicant authorizes Follett to use any information provided by the Applicant pursuant to this Agreement for the purpose of administering the Applicant's Account(s). Applicant authorizes Follett to use any information provided by the Applicant pursuant to this Agreement for the purpose of administering the Applicant's Account(s). In creating and handling Accounts hereunder, Follett assumes none of the Applicant's responsibilities under federal or state laws that govern the creation and administration of student financial aid programs. Applicant acknowledges that it is solely responsible for complying with trust, record keeping, accounting and distribution requirements of such laws and, to the extent permitted by applicable law, will indemnify Follett against any claims resulting from Applicant's non-compliance.

APPLICANT'S AUTHORIZED REPRESENTATIVE SIGNATURE: _____ DATE: _____

CAMPUS AGREEMENT OF ACCOUNT SETUP (campus accounts only)

By signing below, the College/University approves the creation of this account, and has verified the information provided. The College/University is responsible for payment in the occurrence of non-payment of the department.

CAMPUS REPRESENTATIVE SIGNATURE: _____ DATE: _____

FOLLETT HIGHER EDUCATION GROUP, INC.
STORE MANAGER APPROVAL: _____ DATE: _____

Attachment: efollett Rental Agreement