

Institutional Account Application



Institutional Account Application

ORDERING ACCOUNT INFORMATION

Institution Name _____

Website _____

Contact Name _____ Title _____

Phone _____ Email _____

Shipping Address _____

City _____ State _____ Postal Code _____ Country _____

BILLING INFORMATION

Contact Name _____ Title _____

Phone _____ Email _____

Tax Exempt Number (Virginia only) _____

Billing Address _____

City _____ State _____ Postal Code _____ Country _____

What does your institution require for payment?

- Signed purchase order
- Purchase order number only
- Other (Specify _____)
- Nothing is required

TERMS

1. I, the undersigned, agree to pay any amounts charged hereunder are due within 30 days of the date indicated on the invoice.
2. Cayambis Music Press reserves the right to amend these terms prospectively by written notice at any time.
3. I, the undersigned, hereby agree that in the event of default in the payment of any amount due, and this account is placed in the hands of an agency or attorney for collection, I will pay an addition charge equal to the cost of collection including agency fees, attorney fees and court costs incurred as permitted by laws governing these transactions.
4. I, the undersigned, hereby warrant that the sheet music subject to this Institutional Account shall only be used for nonprofit, educational purposes.
5. I, the undersigned, hereby warrant that standard check-out and return processes observed by the undersigned institution will be followed in every instance with respect to the products that are the subject of this Institutional Account, and I will pay for any damages or costs related to agency fees, attorney's fees and costs incurred as a result of a deviation from the standard check-out and return process.
6. I, the undersigned, hereby warrant I will take all reasonable steps to recognize and fully enforce the notice attached hereto as shall appear on each piece of material subject to the Terms of this Institutional Account.

I also hereby certify that all statements in this application are true and complete and are made for the purpose of obtaining credit. By signing this form I agree to the Terms and furthermore am authorized to enter into this agreement.

Authorized Signature

Name (printed) _____

Institution _____

Title _____

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