



200 Powell Place, Suite 100
Brentwood, TN 37027-7707

Dear Customer:

Thank you for your initial order and/or interest in opening a net 30-day charge account with Lifeway. This account provides a convenient way to shop with our various 1-800 numbers and, online at our website: www.lifeway.com.

Please complete the enclosed credit application in full. Incomplete credit applications may delay processing and future orders may hold until your account is approved. You may use a debit/credit card at time of ordering until your account is approved.

For credit references, please list vendors such as *florists, publishing companies, printing companies, bookstores, music stores, etc.* All references should have one year or more of verifiable credit history. Please do not list major credit cards or vendor credit cards like Visa, Home Depot, or Staples, etc. as they will not provide references. Also, please do not list utilities.

If providing a bank reference, please be sure that the signature on the credit application is the authorized signature for the bank account. In order to comply with your credit application, it will be necessary for you to list the appropriate account information including account numbers, phone numbers, and addresses.

If you are interested in ordering online at www.lifeway.com, you have the option to preselect a PIN number for your account. The PIN number must be numeric, not letters, and must include four digits. Please also provide the email address you will use for ordering online.

If you do not wish to have an open line of credit but would like to make credit/debit card purchases online or at 800-458-2772, please make a note in the comments section of the application. It will not be necessary to provide credit references if you do not wish to have an open line of credit. Online orders require a PIN number to be selected. If you are a tax-exempt organization, please include a copy of your state sales tax exemption certificate issued by your state department of revenue.

You may send the application by email to customeraccounts@lifeway.com. Applications may also be mailed to:

Lifeway
200 Powell Place, Suite 100
Attention Accounts Receivable
Brentwood TN, 37027-7707

Thank you,
Lifeway Credit Department



INVITATION TO OPEN A CHURCH ACCOUNT

| CHURCH INFORMATION | | | | |
|---|------|----------------------------|---------------------------------|--|
| Name of Church / Ministry or Organization | | Email Address: | Telephone No. () | |
| Name of Association or Sponsoring Church: (if affiliated with SBC) | | Applicant Website Address: | Fax No. | |
| Church Physical Address | | City | State Zip Code | |
| Send statement to: (mailing address) | | | Telephone No. () | |
| Address | | City | State Zip Code | |
| Pastor or Minister | | | Telephone No. () | |
| Address | | City | State Zip Code | |
| Treasurer | | | Telephone No. () | |
| Address | | City | State Zip Code | |
| Trustee or Chairman of Deacons | | | Telephone No. () | |
| Address | | City | State Zip Code | |
| *Credit Reference (1) | | Acct Number | Telephone No. () | |
| Address | | City | State Zip Code | |
| *Credit Reference (2) | | Acct Number | Telephone No. () | |
| Address | | City | State Zip Code | |
| Meeting Place | Own: | Rent: | If Owned, Approximate Valuation | |
| Established Since | | Average Attendance | Average Weekly Offering | |
| Comments | | | | |
| *Please indicate a 4 digit PIN Number if desired. (See enclosed letter for details) PIN# _____ | | | | |
| Everything stated above is correct. Lifeway Christian Resources is authorized to check credit references listed above and provide credit references to other vendors concerning this account. Terms are Net 30. A late fee of \$10.00 per month will be calculated at 60 days from invoice date. If account is not paid within the above terms, credit privileges may be suspended without further notification. If account is not paid in full and is placed with an attorney or collection agency, debtor agrees to pay attorney fees and court costs. | | | | |
| Authorized By (Signature) | | | Date | |

Once you have completed this form, please email it to customeraccounts@lifeway.com