



SELINA NATURALLY™  
home of CELTIC SEA SALT® BRAND

## Credit Application

|  |            |              |
|--|------------|--------------|
| <b>Company</b>   |            |              |
| Billing Address  |            |              |
| City   | State      | Zip Code     |
| Shipping Address   |            |              |
| City   | State      | Zip Code     |
| Business Start Up Date   |            | Phone Number |
| Previous names under which business has been operated and dates of operation   |            |              |
| Name   | From       | To           |
| <b>Business References:</b> Please complete all portions to insure that your account is opened as quickly as possible. <b>Tree of Life, Frontier and Mtn. People's Warehouse do not give references.</b> Processing is delayed without fax numbers. <b>No bank references.</b>   |            |              |
| <b>Company</b>   |            |              |
| Address  |            |              |
| City   | State      | Zip Code     |
| Account Number   |            |              |
| Phone Number   | Fax Number |              |
| <b>Company</b>   |            |              |
| Address  |            |              |
| City   | State      | Zip Code     |
| Account Number   |            |              |
| Phone Number   | Fax Number |              |
| <b>Company</b>   |            |              |
| Address  |            |              |
| City   | State      | Zip Code     |
| Account Number   |            |              |
| Phone Number   | Fax Number |              |
| Permission is herewith granted to obtain information from all listed references. To the best of my knowledge the above information is accurate. I understand that Selina Naturally™ terms are net 30 days from the date of invoice, and that my order may not be shipped if my account is past due. <input type="checkbox"/> Agree <input type="checkbox"/> Disagree |            |              |
| <b>Signature of person responsible for account</b>   |            | <b>Date</b>  |