

Agreement Consignment Program

Please complete this Agreement and mail or fax it with the completed Consignment Program Order Form to Forte Sports. Please be sure to sign the Agreement where indicated. Receipt of the Order Form, Agreement and payment authorizes Forte Sports, Inc to ship the products requested.

1. I agree to accept responsibility for the goods ordered.
2. I agree to pay Forte Sports the following for each product our organization sells:
 - Bungee Bag \$2.99
 - Solo Soccer \$4.99
 - Bungee Baseball Trainer \$2.99
3. I agree to the following payment terms: I will pay Forte Sports within 30 days of the requested delivery date or other date agreed to in writing.
4. If I elect to return product, I agree to the following Return Product Terms: Only unsold, unused product may be returned. Furthermore, I agree to return the unsold, unused product within 30-days (or other date agreed to in writing) of the requested delivery date. If the unsold, unused product is not returned within this 30-day period (or by other date agreed to in writing), I agree to pay Forte Sports for all product ordered. Return product will be shipped to the following address: Forte Sports, Inc., 3103 Woolen Way, Newark, DE 19711
5. I agree to pay the shipping costs for all returned product.

As the AUTHORIZED OFFICER of (organization name) _____, I (please print your name) _____ agree to all the above terms and conditions.

Signature

Date

Forte Sports has sole discretion to accept or decline applications for its Consignment Program.

Order Form Consignment Program

Delivery Date: _____

Cases

Soccer Bungee Bag _____
Minimum Order 1 case (144 pieces)

Solo Soccer _____
Minimum Order 1 case (36 pieces)

Bungee Baseball Trainer _____
Minimum Order 1 case (144 pieces)

Billing/Shipping Information:

Ship To:
Organization Name: _____
Contact Name: _____
Contact Title: _____
Billing Address: _____
Billing City, State, Zip Code: _____
Contact Day Phone: _____
Contact Evening Phone: _____
Contact Email Address: _____

Bill To:
Organization Name: _____
Contact Name: _____
Billing Address: _____
Billing City, State, Zip Code: _____
Contact Day Phone: _____
Contact Evening Phone: _____
Contact Fax: _____
Contact Email Address: _____

Shipping Charges

_____ Cases Soccer Bungee Bags	X	\$30.00 each	=	\$ _____
_____ Cases Solo Soccer	X	\$15.00 each	=	\$ _____
_____ Cases Bungee Baseball Trainer	X	\$30.00 each	=	\$ _____
Total Shipping Charges (Must be paid at time of order)				\$ _____

Payment Method (Shipping Charges MUST be paid before order can be shipped)

Visa _____ MasterCard _____ American Express _____ Check _____
Credit Card Number: _____
Expiration Date: _____
Name on Card (Print): _____
Signature: _____

Mail your completed Order Form and the following signed Agreement to:
Forte Sports, PO Box 422, Newark, DE 19715-0422

If paying by credit card, you can fax your order to 302-731-0298.
If you should have any questions, please call Forte Sports at 1-800-828-6433