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Application For North American Independent Sport Consultants

P.O. Box 76 • Orange, Texas 77630 • (888) 209-9211
www.allsportrating.com • Email: Contact@allsportrating.com

INDEPENDENT SPORT CONSULTANT INFORMATION

Applicant Soc. Security or Soc. Ins.# Daytime Phone Number Evening Phone Number Fax Phone Number

Applicant Last Name (No company name accepted. need DBA) Applicant First Name MI

Mailing Address, Street Number & Name (P.O. Box US Only) Apt. No. / Ste

City State/Prov Zip Code/Postal Code

Shipping Address, Street Number & Name, if different than above (P.O. Box US Only) Apt. No. / Ste

City State/Prov Zip Code/Postal Code County (US Only)

Email Address

If the shipping address is in an unincorporated zone, please send in the Sales Tax Information form with this application.

INDEPENDENT SPORT CONSULTANT CO-APPLICANT INFORMATION

Co-Applicant Soc. Security #: _____

Co-Applicant Last Name Co-Applicant First Name MI

SPONSOR INFORMATION

Sponsor ID#: _____ Daytime Phone Number: _____

Sponsor Last Name Sponsor First Name

METHOD OF PAYMENT (Cost is \$45.00 US plus applicable sales tax.)

Visa/MC Discover (US Only) Amex (US Only) Check

Total Amount Due \$45.00

Credit Card Number: _____

Exp. Date (MM/YY): ____/____

We hereby acknowledge that I/we have read the Agreement on the reverse page and I/we also agree that I/we will abide with all of Sportrating Policies and Procedures stated in this Agreement and in the Sport Consultant Reference Guide. Applicants/Co-Applicants must be at least 18 years of age.

Cardholder
Signature _____ Date _____

Applicant
Signature _____ Date _____

Co-Applicant
Signature _____ Date _____

All information needs to be completely filled in for this application to be processed. Please make a copy for your records.