

Midwest Hop Producers, LLC
CUSTOMER INFORMATION FORM

BUSINESS INFORMATION

Company Name:					Date:		
DBA:							
Contact Name:							
Phone:		Fax:		E-mail:			
Billing Address:							
City:			State:		ZIP Code:		
Date Business Established:			Website:				
Industry Segment:		Large Brewery	Regional Brewery	Contract Brewery	Micro Brewery	Brewpub	Nano Brewery
Current Production:		_____ Barrels		Production Capacity:		_____ Barrels	

CONTACT DETAILS

Owner:						
Phone:		Fax:		E-mail:		
Purchasing Contact:						
Phone:		Fax:		E-mail:		
Head Brewer:						
Phone:		Fax:		E-mail:		
Assistant Brewer:						
Phone:		Fax:		E-mail:		
Accounts Payable Contact:						
Phone:		Fax:		E-mail:		

SHIPPING DETAILS

[<input type="checkbox"/>] Primary shipping location same as billing						
Address:						
City:			State:		ZIP Code:	
Phone:		Fax:		E-mail:		

CREDIT CARD AUTHORIZATION

Company Name:			Card Type:			
			Visa	MasterCard	Discover	American Express
Cardholder:			Billing Address			
Credit Card Number:			City:		State:	Zip Code:
Expiration Date:			Country			
CVV Number:						

By completing and signing this form, I authorize Midwest Hop Producers, LLC (MHP) to bill the credit card listed above for merchandise and services rendered by MHP. My signature on this form indicates as cardholder the information is true and correct. To remove authorization of this credit card, a written request must be provided to MHP by the named cardholder.

SIGNATURES

Cardholder Signature:
Title:
Date:

Cardholder Signature:
Title:
Date: