

MARJON CERAMICS INC.
CUSTOMER ACCOUNT FORM



New Customer Account Information Change

Personal: Please fill out *section 1 only*
Businesses: Please fill out *sections 1 and 2*

Section 1: Personal Information

Name/Owner's Name: _____

Home Address: _____ City: _____ State: _____

Zip: _____ Phone: _____

*Email Address: _____

Check any box that applies to you: Military/Veteran AZ School of Fired Arts Student
 Arizona Clay Association Member Teacher (teacher ID required)

Section 2: Business Information

For tax exemption, provide a copy of AZ Tax Revenue License & complete AZ Form 5000/5000A

Business Name: _____

Business Address: _____ Suite: _____

City: _____ State: _____ Zip: _____

Tax Number: _____ Verified: _____

Business Phone: _____

Driver License Number: _____ Exp: _____

Visa/MC Number (optional): _____

Exp: _____ 3 digit CCV#: _____ Billing Zipcode: _____

Authorized Buyer(s): _____

For Office Use Only:

Customer #: _____ Initial Purchase Invoice #: _____ Set Up Date: _____

Circle One: 10% 20% 30% CS FD FK IN2 KD KP MI RT SC SD SF

Military/Veteran Teacher School/Institution AZ School of Fired Arts Student
 Store Front Potter Finished Ware AZ Clay Association Member
 Home Studio S.A.C.A Senior Center Parks & Rec. Emailing List Only