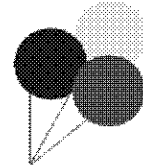


PARTY LAND®



"Where Fun Parties Begin"

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ORGANIZATION DISCOUNT APPLICATION

Name of business or organization: _____

Officers of business or organization:

Print Name Title Signature

Print Name Title Signature

Print Name Title Signature

Print Name Title Signature

Print Name Title Signature

Address: _____

If Tax Exempt, Please Enter Certificate Number: _____

Copy of Certificate MUST be attached to this Application

Phone: (____) _____

Fax: (____) _____

Email: _____

A letter on organization or business letterhead signed by an authorized officer must be presented when you make your first purchase. Purchase MUST be paid for with an organization or company check or a credit card with a bank imprint of the name of your organization embossed on it. Details of discount program subject to change. Some clearance items or rentals may not apply. Organizational Discount may not be used with any other discount.

Thank you!

Internal use only: _____ Entered into POS _____ Copy of Tax Exemption