



## Sales Representative Registration

Please Type:

<b>Sales Organization: VALUE MERCHANT SERVICES LLC</b>		
<b>Client group #: 17</b>	<b>Entity #: 44503</b>	<b>Short name: MS000VMS</b>
<b>Representative Name:</b>		<b>Date Hired:</b>
<b>Home Address:</b>		<b>E-mail:</b>
<b>City, State, Zip:</b>		
<b>Home Phone #:</b>		<b>Fax #:</b>
<b>Social Security #:</b>		<b>Driver's License # &amp; State:</b>
Have any of the principals ever been convicted of a felony? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Have any of the principals or the applicant ever filed for bankruptcy? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Have you previously sold bankcard processing services? <input type="checkbox"/> YES <input type="checkbox"/> NO		
If Yes, what was the company name you sold for?		
<b>Dates employed by the above?</b>	<b>From:</b>	<b>To:</b>
<b>Previous employer address:</b>		
<b>Previous employer phone #:</b>		
<b>If you have not previously sold bankcard processing please complete the following employer information.</b>		
<b>Name:</b>		
<b>Address:</b>		
<b>City, State, Zip:</b>		
<b>Phone #:</b>	<b>Type of Business:</b>	
<b>Title:</b>	<b>Employed From:</b>	<b>To:</b>

To induce Elavon, reliance thereon, I certify that by my signature below, the accuracy of all the foregoing information and authorize Elavon, credit bureaus, or other agencies employed by Elavon, to investigate/verify all references provided herein and all statements of other data obtained from me or other persons pertaining to my work experience, credit or financial responsibility.

**By signing below I further certify my understanding that 1.) I may not represent to any party or business entity products of Elavon, using any business name than "Sales Organization" name listed at the top of this form: and 2.) By signing the Merchant Premise or Site Inspection for any merchant application, I am certifying, subject to criminal penalties for false certification, that I personally conducted the premise or site inspection.**

\_\_\_\_\_  
Sales Representative signature

\_\_\_\_\_  
Date