

# FRONTIER STOCKYARDS BUYER REGISTRATION

NAME: \_\_\_\_\_

DOING BUSINESS AS: \_\_\_\_\_

(IF DIFFERENT THAN ABOVE NAME)

MAILING ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

FAX NUMBER: \_\_\_\_\_

WHAT SALE ARE YOU REGISTERING FOR? \_\_\_\_\_

## CREDIT INFORMATION

(INTERNAL USE ONLY)

BANK NAME: \_\_\_\_\_

BANK ADDRESS: \_\_\_\_\_

BANK TELEPHONE: \_\_\_\_\_

REFERENCE AT BANK: \_\_\_\_\_

RETURN TO:

FRONTIER STOCKYARDS - PO BOX 975 - MILES CITY, MT 59301

OR FAX TO: 406-234-8711