



THE SHOE THAT GRIPS®

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**Trade References (a minimum of 3 references are required)**

Please provide information for 3 companies which currently extend credit to your company. Be sure to fill this form out completely and with current contact information to ensure proper and timely handling of your request.

1. Company Name: \_\_\_\_\_

Complete Address: \_\_\_\_\_

Phone: \_\_\_\_\_ / Fax: \_\_\_\_\_ / Acct#: \_\_\_\_\_

2. Company Name: \_\_\_\_\_

Complete Address: \_\_\_\_\_

Phone: \_\_\_\_\_ / Fax: \_\_\_\_\_ / Acct#: \_\_\_\_\_

3. Company Name: \_\_\_\_\_

Complete Address: \_\_\_\_\_

Phone: \_\_\_\_\_ / Fax: \_\_\_\_\_ / Acct#: \_\_\_\_\_

\*By signing below, I agree to release trade reference information to Shoes for Crews, LLC for credit approval.

\*Signature: \_\_\_\_\_ / Title: \_\_\_\_\_ / Date: \_\_\_\_\_