

# LWR FAIR TRADE FAIR CONGREGATION ACCOUNT FORM



The LWR Handcraft Project is a partnership of Lutheran World Relief, SERRV, and your congregation. Thank you for holding an LWR Fair Trade Fair. Your participation makes a difference in the lives of disadvantaged artisans, farmers and their families all over the world.

Please sign and return this form and the Congregation Agreement form (see reverse side) to SERRV.

Questions? Call 1.888.294.9660

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Accounts may be created by a Corporation, Nonprofit Organization, Religious Institution, or Individual. Please complete the form accordingly.

## 1. Name of Customer \_\_\_\_\_

Is the customer a  Church or other religious institution  Corporation ( for-profit or  nonprofit)  
 Individual  Partnership If a Corporation, date incorporated: \_\_\_\_\_

Contact Person (authorized to place orders) \_\_\_\_\_

Street Address (Shipping Address) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Day Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

Denomination:  ELCA  LCMS  Other \_\_\_\_\_

Organization's Federal Tax ID Number -or- Individual's Social Security No. \_\_\_\_\_

We are required to have either the Federal Tax ID (for a church or organization) or a Social Security Number (for an individual) on file for all customers. Churches have a Federal Tax ID number even though they are tax-exempt, ask your church accountant for it.

Do you hold a valid Resale Certificate?  Yes  No

Is the Sponsoring Organization Tax-Exempt?  Yes  No

If yes to above and based in Maryland or Wisconsin, please fill in section n. on the reverse side.

## 2. Billing Address (if different from above)

Name \_\_\_\_\_

Organization Name \_\_\_\_\_

Street Address or P.O. Box \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

## 3. Signature confirms acceptance of all terms and individual or organizational financial responsibility for payment.

Accepted by: \_\_\_\_\_ Title: \_\_\_\_\_  
(Owner or authorized legal representative of organization)

Date: \_\_\_\_\_ Organization \_\_\_\_\_

**Please complete both sides, sign, copy and return this form to SERRV.**  
**Fax toll-free to 1.888.294.6376 or mail to: LWR Handcraft Project, c/o SERRV**  
**PO Box 365, 500 Main Street, New Windsor, MD 21776-0365**