

The Good Times Card Program

A married person may apply for individual credit, you are applying for:

- INDIVIDUAL CREDIT**, complete only individual section.
- JOINT CREDIT**, with another person, complete entire application.

INFORMATION ABOUT YOURSELF (Please Print)

For WI Residents Only: Check box if you are married:

First Name _____ Middle Initial _____ Last Name _____ Home Telephone _____ Social Security Number _____
 () _____ - _____ - _____

Date of Birth (MM/DD/YY) _____ Current Address _____ Apt. # _____ City _____ State _____ Zip Code _____
 / /

Since (MM/YY) Buyer/Owner Rent/Lease Other/Misc. Previous Address (If less than two years at present) _____ Apt. # _____ City _____ State _____ Zip Code _____

Employer _____ Position _____ Since (MM/YY) _____ Gross Monthly Income _____ Business Telephone _____
 ()

Previous Employer _____ From (MM/YY) _____ To (MM/YY) _____ E-Mail Address _____

Additional Monthly Income* _____ Source _____ Check if you have a: Checking Account Savings Account

*Note: Alimony, child support or separate maintenance income need not be disclosed if you do not wish to have it considered as a basis for paying this obligation.

JOINT CREDIT or if you are a MARRIED WISCONSIN RESIDENT

First Name _____ Middle Initial _____ Last Name _____ Social Security Number _____ Date of Birth (MM/DD/YY) _____
 _____ - _____ - _____ / /

Current Address _____ Apt. # _____ City _____ State _____ Zip Code _____ Home Telephone _____
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Since (MM/YY) _____ Employer _____ Position _____ Business Telephone _____ Gross Monthly Income _____ Since (MM/YY) _____
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APPLICANT(S) SIGNATURE REQUIRED BELOW

By completing and signing this credit application you are applying to Household Bank (SB), N.A. ("Household") for credit to purchase goods and services from an authorized The Good Times Dealer ("The Good Times Dealer"). Certain types of vehicles sold by The Good Times Dealers will be required to be financed as closed-end loans. If you do not qualify for revolving credit, you still may qualify to finance your purchase as a closed-end loan. Therefore, you authorize Household or the The Good Times Dealer to submit your application and credit information to HSBC Retail Services, Inc. ("HRSI"), an affiliate of Household, to review your information for a closed-end loan under a separate retail installment agreement. All of the information furnished on this application is, to the best of your knowledge, complete and accurate. You agree that Household and HRSI may obtain a credit bureau report on you and may check any of the information provided on this application from whatever source they choose. By completing and signing this application, you request a Card issued to you by us which will allow you to make purchases under this Account. By a) signing, using or permitting others to use this Card; b) signing or permitting others to sign sales slips; c) making or permitting others to make purchases by telephone, Internet, or any other means, you agree to the terms and conditions of this Cardholder Agreement and Disclosure Statement, Form 6022-800-40-US-10 (9-04) (which includes an arbitration provision) stated on both sides of this combined application and Cardholder Agreement and Disclosure Statement, which are incorporated herein by reference. You have read and received a copy of your Agreement before making any purchase under this Account. Terms are attached. If this is a joint credit application, you understand that each applicant has the right to use the Account and that you shall be liable for all purchases made under the Account by any joint applicant. You grant us a purchase money security interest in the goods purchased on your Account. **You understand that we may provide information relating to our transactions and experiences with you to others, including The Good Times, whether or not you are approved for credit. You may prohibit the sharing of such information by calling us at 1-800-365-3804.**

Applicant's Signature _____ Date (MM/DD/YY) _____
 / /

Joint Applicant's Signature _____ Date (MM/DD/YY) _____
 / /

STORE USE ONLY:

Applicant's ID (Type and Number)	State	Date of Issue	Exp. Date
Applicant's Second ID (Type and Number)	State	Date of Issue	Exp. Date
Joint Applicant's ID (Type and Number)	State	Date of Issue	Exp. Date
Joint Applicant's Second ID (Type and Number)	State	Date of Issue	Exp. Date

ACCOUNT #: _____

Authorization Number _____ Name of Person Obtaining Verification and # _____

6022-800-40-US-10 (9-04)



IMPORTANT CUSTOMER DISCLOSURE INFORMATION ATTACHED - PLEASE DETACH AND RETAIN FOR YOUR RECORDS.