

SHOOTING EDGE

Application for Dealership

Thank you for your interest in Shooting Edge Technology products. We look forward to working with you and wish great success. Upon completing the application, please send the requested items to Shooting Edge Technology. If you are not already working with a sales representative, one will contact you promptly.

Please include the following items with your application:

1. A copy of your retail sales licence and/or tax exempt number.
2. Proof of an archery pro shop or sporting good retail outlet that is open to the general public and maintains regular business hours.
3. A copy of your yellow page listing and/or a photograph of your store front.
4. For mail order/web based business only please provide catalog or web site info and warehouse stocking location.

Please refer to the Dealer Price List and Product Catalog for information regarding products, dealer programs, payment terms, incentives, discounts, how to place orders, returns, shipping and customer services.

General Information	
Company Name	
Contact Name	Alternate Contact Name
Phone Number (Your phone number is your account number)	Fax Number
Web Site (URL)	Do you allow customer to place order via your Web site? (Circle one) Yes No
Preferred Method of Payment (Circle one) Credit Card Prepaid Net-30 Terms	Store Hours (Circle One) Part Time (20-40 Hrs), Regular Hrs, By Apptment Only
Billing Information	
Billing Contact	Phone Number and Extension
Address	
City	State and Zip
Email Address	
Shipping Information	
Shipping Contact	Phone Number and Extension
Address	
City	State and Zip
Email Address	

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