

North America Regional Distributor Application



Company Information

COMPANY:		DISTRIBUTOR TYPE:	Exclusive or Non-Exclusive
BUSINESS REGISTRATION NUMBER:		HST # / TAX ID:	
NATURE OF BUSINESS:			
AVG. ANNUAL SALES:		WEBSITE:	
ADDRESS:			
TOWN/CITY:		COUNTRY:	USA CANADA
STATES/PROVINCE:		POSTAL/ZIP:	
ONLINE STORE LINK:		SOCIAL MEDIA LINK:	

Business Owner's Contact Information:

First name:		Last name:	
Email address:		Phone #	
Remarks:			
Signature:	_____	Date:	_____

Please fill out completely and email to order.easyto@gmail.com

Internal Use Only

NB#		BG#	
FN#		WS#	
HRS		TM#	

