

# DEALER APPLICATION FORM

JAMMAR MFG

Company Name: \_\_\_\_\_  
Contact Name(s) \_\_\_\_\_  
Phone: ( \_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_ ) \_\_\_\_\_  
Website: \_\_\_\_\_ Email: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
\_\_\_\_\_

Branch Offices (Stores):  
\_\_\_\_\_  
\_\_\_\_\_

Trade References:  
1) \_\_\_\_\_  
2) \_\_\_\_\_  
3) \_\_\_\_\_

Company Principals:  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_

Sales Mgr: \_\_\_\_\_ Advertising Mgr: \_\_\_\_\_  
Purchasing Mgr: \_\_\_\_\_ Customer Service: \_\_\_\_\_

**PLEASE COMPLETE:**

# of Employees: \_\_\_\_\_ Years in Business: \_\_\_\_\_  
# of Stores: \_\_\_\_\_ # of Salesmen: \_\_\_\_\_  
% of Business Retail: \_\_\_\_\_ % of Business Institutional: \_\_\_\_\_  
Do you publish a catalog?: \_\_\_\_\_ If yes, how many copies: \_\_\_\_\_  
\*If yes please send us your most recent publication  
Do you utilize mailings/web?: \_\_\_\_\_ Do you offer installation of equipment?: \_\_\_\_\_  
Do you belong to a buying group?: \_\_\_\_\_ If yes, which one: \_\_\_\_\_

**Check what best describes your company (as many as applicable):**

Sporting Goods Retail: \_\_\_ Playground Equipment: \_\_\_ Institutional School Sales: \_\_\_ Recreational Sales: \_\_\_  
Team Sports: \_\_\_ Amusement Industry: \_\_\_ Physical Ed Equipment: \_\_\_ General Contractor: \_\_\_  
Architect: \_\_\_ Installer/Designer: \_\_\_  
Distributor: \_\_\_ Jobber: \_\_\_ Manufacturer: \_\_\_  
Other (describe): \_\_\_\_\_

Thank you for your cooperation in supplying us this information. It will help us to get to know you and your company and better serve your needs.

