



WHOLESALE PRICE LIST REGISTRATION FORM

All requested information is required

Business Name: _____

Reseller#: _____

Contact Name: _____

Title: _____

Email: _____

Type of Business: _____

Do you have a storefront? Yes No _____

Website: _____

Telephone: _____

Fax: _____

Street Address 1: _____

Street Address 2: _____

City, State & Zip: _____

Thank you and we look forward to working with you.

Sincerely,
HomeDecorPlus.com