



We are always looking for new dealers to expand our network
If you are interested in becoming a dealer of defNder products, please complete this form

Date: _____

Business Name: _____ Tax ID or SSN: _____

Business Type: Corp LLC Partnership Sole Prop Resale #: _____

Principal Contact: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Website: _____

Primary Market: _____ Est Unit Sales/Month: _____

Primary Means of Marketing: _____

of Physical Stores: _____ List Store Addresses Below (attach additional on a separate form):

Store #1: _____

Store #2: _____

Store #3: _____

List 3 Trade References (within the racing industry) include name, address & phone number:

1. _____

2. _____

3. _____

Bank Info – Bank Name: _____ Phone: _____

Bank Account #: _____ Bank Contact: _____

Please fax completed form to 619-448-0917 or email to info@defNderneckbrace.com and a representative will be in contact with you. Thank you for your time and interest.