

Trading Details

Trading Name: _____ Years at current address: _____

Current trading address: _____ Telephone: _____
_____ Fax: _____
_____ Email: _____

Post Code: _____ Web Address: _____

Registered address: _____ Delivery address: _____
(if different from trading address) (if different)

Post Code: _____ Post Code: _____

VAT Number: _____ Company Reg No: _____

Time trading: _____ Number of Staff: _____

Business Type: Limited: Partnership: Sole Trader: Plc: Other (please state)

Please comment on your business, (Your market, size of customer base etc)

Bank Details

Bank Name: _____ Branch Name: _____

Branch Address: _____ Sort Code: _____

Account Name: _____

Post Code: _____ Account Number: _____

Personal Details

Full Name: _____ Years at current address: _____

Address: _____ Date of Birth: _____

Telephone: _____

Mobile: _____

Post Code: _____ Owner: Rented: Living with parents:

Authorised Reseller Application Form



Data Protection Policy

I apply to become a BlueBroadcaster reseller for Fantastic Media Ltd, and I confirm that the information detailed in this application form is complete and accurate. I have read and agree to be bound by the terms and conditions enclosed.

Signed by or on behalf of applicant by its authorised signatory

PLEASE COMPLETE THIS SECTION BY HAND

Signature: _____ Title: _____

Printed name (capitals): _____ Date: _____

How did you hear about Fantastic Media?

Trade press: Cold Call: Word of Mouth: Internet: Customer Referral:

Other please state): _____

For Office Use Only

Accept: Decline:

Dealer Info

Dealer Code : _____ Username : _____

Password: _____

Authorised By

Signature : _____ Printed name (capitals) : _____

Authorisation Date : _____

Targeted marketing for a mobile world

Authorised Reseller Application Form



Targeted marketing for a mobile world