GAMBLER
PROFESSIONAL TABLE TENNIS

Wholesale Account Application

Business Name: _____

Contact Person Name: _____
Contact Person Title: _____
Contact Person Email: _____
Contact Person Phone: _____

Business Website: _____
Business Address: _____

Briefly Explain Your Business: _____
_____
_____
_____
_____
_____

How do you sell products? ☐ Physical Store   ☐ E-Commerce

How many locations do you have? _____
How many employees do you have? _____

What is your expected volume per month/year? _____

How did you hear about our wholesale program? _____
_____
_____
_____
_____

Additional Comments: _____
_____
_____
_____
_____
_____
_____