

# The Dorr Mill Store

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## Wholesale Registration Form

Name of Business \_\_\_\_\_ Date \_\_\_\_\_

Contact Person \_\_\_\_\_

Street \_\_\_\_\_

Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Fax \_\_\_\_\_

Please note—Order will not be processed until references have been approved and you have been assigned an account number. This will take at least 7–10 days. Initial order must be paid in advance.

Please fill in the following information.

Tax ID or Resale Number: \_\_\_\_\_

(required for wholesale accounts)

Type of business

- Hooking
- Quilting/Penny Rug Appliqué/Fabric
- Braiding
- Teacher
- Other—if other please define the nature of your business.

Please list three business references with address, phone number, fax & e-mail.

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Please list any comments on the reverse side.