

BANG PRODUCTIONS, Incorporated
Customer Information Form

Customer Name: _____ DBA: _____

EIN: _____ Year Incorporated: _____

Business Model: Distributor
 Retailer

Contact Information (check preferred method)

Sales Contact: _____

Phone Number: _____

Cell Number: _____

Fax Number: _____

Email: _____

Billing Address-

Attention: _____

Address 1: _____

Address 2: _____

City: _____ State/Province: _____

Country: _____ Postal Code: _____

Shipping Address-

Attention: _____

Address 1: _____

Address 2: _____

City: _____ State/Province: _____

Country: _____ Postal Code: _____

Bang Productions proudly used UPS for its Shipping needs. Please select how you'd like your shipping to be billed.

On Products Invoice

Your UPS account: _____

Other: _____

Please supply us with some trade references.

List Studios/Distributors with whom you have a relationship.

Ref 1) Studio/Distributor: _____

Contact/Sales Rep: _____

Phone Number: _____

Ref 2) Studio/Distributor: _____

Contact/Sales Rep: _____

Phone Number: _____

We look forward to working with you, please fax form back to (305) 463-9768 when completed.