



WHOLESALE APPLICATION FORM

This Wholesale Application form is designed to help us get to know you and hopefully, to establish a personal and business relationship.

3 Steps to becoming an Approved Synergistic Nutrition Wholesaler.

1. Complete this form in its entirety. Email or fax to Synergistic Nutrition.
2. A customer service representative will contact you to make sure you are a valid reseller.
3. You will be notified once you have been approved by a customer service rep, and will receive Synergistic Nutrition wholesale pricelist.

Please complete the application below, call us at 864-895-6250 if you have any questions.

Name: _____ **Date of Birth:** _____

Company: _____ **Title:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Telephone: _____ **Fax:** _____ **Cell:** _____

Email: _____

Web Address: _____

Resale Number: _____ **Type of Reseller:** _____ **Years in Business:** _____

Minimum requirements to qualify

If your company wishes to qualify as a Synergistic Wholesaler, we request that you have the following:

1. Representatives adequate to service and educate your prospective clients on the product line.
2. An infrastructure for ordering, stocking, and reselling the product line.
3. Resources to distribute marketing and promotional material.
4. Sufficient capitalization to meet the growing needs of your clients.

Why do you want to be a Synergistic Nutrition Wholesaler? _____

Where did you hear about us? _____

Please return above information by fax: 888-553-1424; email to: support@sgn80.com (Wholesale Application must be typed in subject line); or mail to Synergistic Nutrition, 213 Riverside Court Suite B Greer SC 29650