

Become a Distributor Form

Please fill out the following information accurately. Be sure to complete all required fields* If you prefer, you may print this page and mail, phone or fax the information to:

WAKIL PRO IMAGE

6025 Stage Rd., Suite 42-122

Bartlett, TN 38134

Phone: (901) 275-8445 Fax: (901) 275-8447



Contact information

*First Name:			*Last Name:		*Title:		
*Phone:		Cell:		Fax:		*E-Mail:	
*Company Name:						US Tax ID	
*Address:			*City:		*State/Province:		
*County:			*Zip/Postal Code:				

Channel of Trade

Check all that apply

☐ Retailer ☐ Importer ☐ Exporter ☐ Distributor ☐ Wholesaler ☐ Manufacturer ☐ Other

Other If you select **Other** (please be specific):

Year Company Established: Total Employees: Total Sales Staff:

*What products are you currently representing/distributing?

May we contact these companies for references?

☐ YES ☐ NO

What WPI International products are you interested in?

* Required field entry

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