Reseller Agreement Form

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| The undersigned company wishes to become a Common Sense Press reseller. By signing below, an authorized representative agrees to the Policies, Terms, and conditions of Common Sense Press. Company Name: |
| Printed Name of Owner/Representative: |
| Signature of Owner/Representative: |
| Date: |
| Contact Person: |
| Contact Person’s E-mail: |
| Shipping Address:  |
| City:                                                  State:                      Zip: |
| Mailing Address: |
| City:                                                  State:                      Zip: |
| Business Phone: (         )                                        Fax: (         ) |
| Toll Free Number for orders only:  |
| E-mail for Orders: |
| Web Site: |
| State Resale/Tax Number: |
| I would like to pay my first order via:    [   ] MasterCard    [   ] Visa    [   ] Check |
| Please check your preferred method of payment for all future orders. If paying by credit card, please complete the [Credit Card Authorization Form](http://commonsensepress.com/resellers/credit-auth.htm).Preferred Method of Payment: [   ] MasterCard    [   ] Visa    [   ] Prepayment by Check [   ] Credit (See Prepayment Conditions) |
| If applying for credit, how would you like to pay for future orders until your credit is established?Preferred Method of Payment: [   ] MasterCard    [   ] Visa    [   ] Prepayment by Check |
| We Sell Via:     [   ] Print Catalog       [   ] Storefront       [   ] Online Catalog       [   ] Conventions |
| We appreciate your patronage and want to thank you for becoming a*Common Sense Press* Reseller. |

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