



## Application form for new customers

In order to create an account with Viper Tactical, you are kindly requested to fill in this application and return it to us as soon as possible. Our representative might contact you for further information if needed.

Company Name:

VAT	registr. n°
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Company Address

City	zip code
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Country

	phone n°
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web	email
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Contact Person / Responsible

Business type

SHOP <input type="checkbox"/>	DISTRIBUTOR <input type="checkbox"/>	ARENA <input type="checkbox"/>
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I, the undersigned, declare that the information are true and faithful by law.

Signature of responsible\*

Date

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