

HIHO Wholesale Application



Store Name _____

Store Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Website: _____ Phone Number: _____

Years in Business: _____ Federal Tax ID: _____

Interested in Purchasing (Circle all that apply below):

Women

Men

Accessories

Suntek Shirts

Custom Product

How did you hear about HIHO? _____

Would you be interested in hosting a trunk show? **Yes** **No**

Other brands represented in the store: _____

Approximate size of the store: _____

Order Shipping Address (If Different): _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Purchasing Contact: _____ Phone Number: _____

Email: _____

Accounts Payable Contact: _____ Phone Number: _____

Email: _____

Please return completed form to info@go-hiho.com