



www.shopinviting.com
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New Retailer Application Form

Retailer Name:

Website:

Phone:

Mailing Address:

Billing Address:

Store Location:

Owner Name:

Buyer Name:

Email:

Email:

Phone:

Phone:

Accounts Payable Contact Name:

Email:

Phone:

Retailer Number:

Describe your shop:

Please email the completed form to rsvp@shopinviting.com
We will contact you shortly via email with your application status.
Once approved we will send you your unique code for the online store.
Thank you for your interest!