



The Big Carrot Wholistic Dispensary
348 Danforth Avenue, Toronto, ON M4K1N8
wellness@thebigcarrot.ca (416)-466-8432

Practitioner Discount Application

The Big Carrot Wholistic Dispensary is using this as an opportunity for professionals to try new products, stock their professional dispensary, and build a referral relationship between our dispensary and your practice. If accepted, your card will be added to our dispensary referral list. We hope that this will build a reciprocal relationship between us. We can offer your clients “one-stop-shopping” and personalized services with our staff of health and wellness professionals, working in our dispensary.

A discount of 15% will be applied to most products in our dispensary. This discount does not apply to any other department. The Big Carrot reserves the right to cancel discount privileges at any time without notice. This discount privilege is not transferable for cash and is NOT to be used by anyone other than the applicant.

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

PROFESSIONAL REGISTRATION NUMBER: _____

Please attach a business card. Must be one of the approved professions.
See back of form for the approved list of professions.

Please briefly describe why you would like this discount:

SIGNATURE: _____

DATE: _____



The Big Carrot Wholistic Dispensary
348 Danforth Avenue, Toronto, ON M4K1N8
wellness@thebigcarrot.ca (416)-466-8432

List of Accepted Practitioners

- Naturopathic Doctor
- CCNM Student
- Homoeopath
- Registered Nutritionist
- Herbalist
- Chiropractor
- Doctor of Chinese MEDicine
- Medical Doctor
- Osteopath
- Other*

Other* Must provide two reference letters from two accredited professionals (see list above) verifying that you are trained and/or experienced in the prescribing of supplements, herbal remedies and or nutraceuticals.

Cards must be presented at the time of purchase or a discount will not apply. Please note, that cards in which remain inactive for a year will be cancelled without noticed. Applicants must renew every two years.

Business Card attached

Office Use Only

APPROVED BY: _____

PRACTITIONER CALLED: _____

CARD PICK-UP DATE: _____

PRACTITIONER INITIALS: _____

STAFF INITIALS: _____