



WHOLESALE APPLICATION

Applicant Information

Full Name:

Last *First* *M.I.*

Address:

Street Address *Suite/Unit #*

City *State* *ZIP Code*

Phone:

() _____
Email: _____

Federal Tax ID/SSN:

Business Information

Business Type

- Online Barbershop Other _____
 Brick & Mortar Salon

Preferred Payment Method

- Credit Card Other _____

Estimated Annual Volume

- 5,000 50,000
 10,000 100,000+

How did you hear about Beautiful Bearded Man?

- Facebook Twitter Publication
 Instagram Google+ Website
 Other _____

