

SAGE[®] ARTWORKZONE REGISTRATION FORM

1. Please complete the following application and fax back to activate your ArtworkZone account.
2. After your registration is approved, you will receive login and password via email to log into your account at www.sagemember.com.

COMPANY INFORMATION

COMPANY _____
YOUR NAME _____ TITLE _____
MAILING ADDRESS _____
CITY _____ STATE _____ ZIP _____
PHONE (____) _____ FAX (____) _____
EMAIL _____
WEB ADDRESS _____
UPIC # _____ PPAI # _____ ARA # _____ PSDA # _____ PPPC # _____

DISTRIBUTOR VERIFICATION *(must be completed)*

Please list six promotional product suppliers with whom you are currently doing business:

	<i>company / contact</i>	<i>phone number</i>	<i>account number</i>
1.	_____ (____) _____	_____	_____
2.	_____ (____) _____	_____	_____
3.	_____ (____) _____	_____	_____
4.	_____ (____) _____	_____	_____
5.	_____ (____) _____	_____	_____
6.	_____ (____) _____	_____	_____

CUSTOMER AGREEMENT

Please read the SAGE Customer Agreement (rev 5.0) ("Agreement") located at www.sageworld.com/legal. Your signature below indicates your acceptance of the entire Agreement on behalf of the company identified above and your representation that you have the authority to bind such company to the Agreement. If you cannot access or read the Agreement for any reason, please call us before you sign and we will provide you with a copy.

Signature _____ Title _____
Printed Name _____ Date _____

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info@sageworld.com • www.sageworld.com

SAGE USE ONLY:

GROUP _____

ACCT # _____ ARRIV: ____/____/____ SALES REP: _____ ACCEPTED BY: _____ ML: YES NO