

Est. 1985

ALBION®

ENGLAND

STOCKIST ACCOUNT APPLICATION

COMPANY NAME:

CONTACT NAME:

EMAIL:

TEL

FAX:

TRADING ADDRESS:

VAT NUMBER:

YEAR ESTABLISHED:

PRODUCTS REQUIRED (Please tick below)

- | | | |
|--|--|---|
| <input type="checkbox"/> SADDLES | <input type="checkbox"/> BRIDLES | <input type="checkbox"/> EQUESTRIAN ACCESSORIES |
| <input type="checkbox"/> SPORTING PRODUCTS | <input type="checkbox"/> SPORTING ACCESSORIES | |
| <input type="checkbox"/> LIFESTYLE BAGS | <input type="checkbox"/> LIFESTYLE ACCESSORIES | <input type="checkbox"/> LIFESTYLE BELTS |

SADDLE FITTING QUALIFICATIONS HELD:

DATE QUALIFIED:

NAME OF SADDLE FITTING TRAINER:

DO YOU HAVE EXPERIENCE IN FITTING ALBION SADDLES?:

- YES NO

MEMBERSHIP OF PROFESSIONAL GOVERNING BODIES HELD:

OTHER RELEVANT EXPERIENCE:

DO YOU HAVE RETAIL PREMISES?:

- YES NO

CURRENT SADDLE BRANDS STOCKED:

CURRENT ACCESSORY BRANDS STOCKED:

DO YOU OFFER A WORKING SADDLER OR REPAIR SERVICE?:

- YES NO

Important note: If you are currently trading from retail premises, website or via mail-order, please provide two Trade References...

TRADE REFERENCE #1:

TRADE REFERENCE #2:

