

## Dealer Form

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Company \_\_\_\_\_  
Address 1: \_\_\_\_\_  
Address 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Country: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email Address: \_\_\_\_\_

### Special offer

1. Sign up today to receive exciting newsletters
2. Download Catalogue & Technical Support Free
3. Special Promotion

Signature: \_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_/51

### Authority

- 1.ID card copy
- 2.Census copy
- 3.Registation Company
- 4.Map

### Payment Methods:

- By Bank Accout \_\_\_\_\_  
 By Credit Card \_\_\_\_\_  
 Other

Fax dealer form to +66-2-578-6234 to 5. You can also scan it and send it as an attachment to [webmaster@interprint.co.th](mailto:webmaster@interprint.co.th)