



West Coast Novelty Corp. • New Account Prospect Form

Please return form to fax #: (510) 748-4478

Company Info:

Date: _____

Contact Name: _____

of Stores: _____

Company Name: _____

How Long in business: _____

Storefront Address: _____

Resale Permit #: _____

City: _____

Other Licensed Products Suppliers: _____

State, Zip: _____

Phone: _____

Other Suppliers: _____

Fax: _____

E-mail address: _____

Website address: _____

Company Type(choose one):

Items/Categories Currently Selling:

- Airport Shop:
- Amusement Park Shop:
- Apparel Specialty Stores:
- Athletic Specialty Stores:
- Better Department Stores:
- Casino Shop:
- Catalog:
- Closeout Store:
- Stadium: Shop/Concessionaire:
- Convenience Store:
- Distributor:
- Drug Store:
- Exporter:
- Fan Shop:
- Gift Shop:
- Grocery/Food Store:
- Hotel Shop:
- Hypermart:
- Internet:
- Licensee Retail Outlet:
- Mass Market:
- Dept./Value Dept. Stores:
- Souvenir Shop:
- Sporting Goods Stores:
- Street Vendor:
- Team Shop:
- TV Retail:
- Warehouse Club Store:

Source of Lead / How did you hear about us?:

Advertising: Specify: _____

Trade Show: Specify: _____

Referral: Specify: _____

Other: Specify: _____

WCN products Interested In:

NFL: MLB:

NBA: NHL:

NCAA: Custom:

Travel: Other: List: _____

DO NOT FILL OUT BELOW THIS LINE (WCN use only)

Rep Assigned: _____

Sales Manager: _____

Date: _____

CATALOGS TO SEND:

NFL General NFL Other: _____ Spring Winter Travel Custom

Other/Sell Sheets: _____

Remarks:

- Complete Credit Application
- Copy of Resale Certificate
- Photos of: Retail Center/Storefront/Store Interior (WCN rep may provide)