



Retailer Registration

Type of Account Terms Credit

Billing Information

First Name:	<input type="text"/>	Last Name:	<input type="text"/>
Company Name:	<input type="text"/>		
Address:	<input type="text"/>		
Address Cont.:	<input type="text"/>		
City:	<input type="text"/>	State:	<input type="text"/>
Province/Region:	<input type="text"/>	Postal Code:	<input type="text"/>
Country:	<input type="text"/>		
Email Address:	<input type="text"/>		
Phone:	<input type="text"/>	Ext.:	<input type="text"/>

Financial and Credit Card Information

Tax ID:	<input type="text"/>
Credit Card Number:	<input type="text"/>
Type:	<input type="checkbox"/> American Express <input type="checkbox"/> Discover <input type="checkbox"/> Master Card <input type="checkbox"/> Visa
Expiration Date: Month	<input type="text"/>
Year	<input type="text"/>

Shipping Information

<input type="checkbox"/> Shipping Address Is Same As Billing Address			
First Name:	<input type="text"/>	Last Name:	<input type="text"/>
Company Name:	<input type="text"/>		
Address:	<input type="text"/>		
Address Cont.:	<input type="text"/>		
City:	<input type="text"/>	State:	<input type="text"/>
Province/Region:	<input type="text"/>	Postal Code:	<input type="text"/>
Country:	<input type="text"/>		
Email Address:	<input type="text"/>		
Phone:	<input type="text"/>	Ext.:	<input type="text"/>