



Thank you for your interest in becoming a Suntegrity Skincare authorized account. Please fill out the following form completely and submit to info@suntegrityskincare.com. We will let you know if your application has been accepted as an authorized account shortly.

First Name:	
Last Name:	
Company Name:	
Position within Company:	
# of employees: (0-1, 2-10, 10-20, 20-50, 50+)	
Type of account: (ie. Spa, Salon, Dr. Office, Retail Store, On-line Store Only)	
Number of locations:	
Email:	
Website:	
Address:	
Address 2:	
City:	
State:	
Zip Code:	
Country:	
Telephone (with area code):	
Is your website affiliated with Amazon?: (Yes/No)	
What are the 5-7 top selling brands in your store?	
How did you hear about us? (ie. Suntegrity Website, Sales Rep, Industry Magazine, Consumer Magazine, Another Certified Account, Trade Show, Other)	
Questions or comments:	