

SIGN-UP SHEET

Store Name: _____

Contact Name: _____

Email: _____

Physical Address: _____

Store Phone Number: _____

BG Distributor: _____

BG Representative: _____

Rep Phone: _____ Email (if known): _____

<u>LIST EMPLOYEES</u>	<u>SVC MGR</u> <u>√</u>	<u>SVC ADV</u> <u>√</u>	<u>RECEP</u> <u>√</u>	<u>OTHER</u> <u>√</u>

YOUR CHOICE: PRINT, FILL OUT & FAX BACK TO 251-621-7034 OR EMAIL TO: CKEENEY@MARKEEGROUP.COM
SANDY@MARKEEGROUP.COM
LISA@MARKEEGROUP.COM

Any questions? Contact the MarKee Group at 888-300-4629