



Designer Discount Application

Please Print Clearly. Thank You.

Date: ___ / ___ / ___ Resale (Tax ID) #: _____

Name: _____

Company: _____

Address: _____

City: _____ State: |__|__| Zip: |__|__|__|__|

Phone: _____ home office mobile

Email: _____

Website: _____

I certify that I am in the business of selling beads, jewelry, handbags, clothing, or other bead-related products, and that the items I purchase tax-free from Boston Bead Company are intended solely for resale purposes:

Signature: _____ Date: ___ / ___ / ___

1. Would you like to be on the Boston Bead Company E-Mail List to receive newsletters and invitations to designer special events? YES NO
(Boston Bead Company does not sell or share it's mailing list)

2. Do you shop in? Cambridge Salem

3. Are you a local customer? Yes No

4. Products purchased most from Boston Bead Company:
(e.g. findings, stone, glass, etc.):

5. Additional products you would like to see Boston Bead Company carry:

6. Comments or Suggestions:

This program is exclusively for our registered Boston Bead Company customers and it will afford you discounts when you shop at Boston Bead Company. Thank you for shopping with us!