



Dealer Application Form

Please fill out and return via Email to Info@VeloFuze.com

Please call us with questions @ 480.580.0376

Company Name: _____

Business

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Web Address: _____

Years in Business: _____

Authorize Buyers: _____

Products interested in:

Preferred Payment Option: Please circle one:

Paypal - Check/Money Order - Credit Card - Net30

Signed _____ Date _____

