

CONSENT FORM DISTRIBUTION GUIDELINES



WORTMANN KG

Internationale Schuhproduktionen
Klingenbergstraße 1-3
32758 Detmold
Germany

COMPANY:			
POSTAL CODE:	PLACE:	COUNTRY:	
BUSINESS AREAS:	<input type="checkbox"/> STATIONARY SPECIALISED TRADE	<input type="checkbox"/> MAIL ORDER	<input type="checkbox"/> E-COMMERCE

(PLEASE MARK THE ACCORDING BUSINESS AREA(S) WITH A CROSS.)

Hereby I declare my consent to distribute all Tamaris products, whether they come from Wortmann directly or are sourced by Tamaris franchisers, under the rules of the Tamaris distribution guidelines, to the extent that my activities are concerned.

I intend to sell Tamaris products in the following sales areas:

STATIONARY SALES AREAS (KINDLY ENTER THE ENTIRE ADDRESS PER SALES AREA.)

1)

2)

3)

4)

5)

6)

7)

8)

WEBSITES (URLS): (IN CASE SEVERAL WEBSITES ARE ENTERED, PLEASE SEPARATE THESE THROUGH A COMMA.)

TO ENTER MORE SALES AREAS, PLEASE COPY THIS FORM.

PLACE

DATE

NAME IN BLOCK LETTERS, SIGNATURE