



Global Printing Solutions

SUPPLIER REGISTRATION FORM

The Supplier Registration Form is an application for consideration for Press Emporium's online Global Print Café. GPC offer suppliers the opportunity to sell their printing services under the Press Emporium name and brand through our online store front. We offer this additional outlet for your services and products by requesting a minimum 15% reseller discount in return. All suppliers that wish to be considered to join Press Emporium's team of exclusive print manufacturers must complete this form.

Company Information

Company Trade Name	
Company Registered Name	

Company Officer Contact Person	
Phone # (0-000-000-0000)	
Email Address	

Accounts Payables Contact Person	
Phone # (0-000-000-0000)	
Email Address	

Do you manufacture printed or imprinted materials in-house?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Company Physical Address				
City or Town				
State or Providence		Zip code		
Country				
Phone # (0-000-000-0000)		Ext.		
Company Website				

U.S. Tax Resale ID	
E.U. VAT Registration Number	

Bank Name			
Address			
State or Providence		Zip code	
Country			
Phone# (0-000-000-0000)		Ext.	
Account Number			
ABA Routing Number			
International Swift Code			
Email Address			

Printing or Imprinting Services Being Offered

Type Of Printing	(Mark All That Apply)	Production Size Range	Turnaround Time
Commercial Offset			
Digital			
Commercial Offset & Digital			
Wide Format			
Custom Letterpress / Engraving			
Flexography			
Imprinting and Silk Screening / Die Sub			
Metal Etching and Stamping			
Packaging, and Carton Printing			

In House Finishing and Binding Solutions

Folding			
Die cutting			
Embossing/Debossing			
Tinting			
Sewing			
Gluing			
Saddle Stitching			
Adhesive Cover			
Smythe Sewing			
Installation			

Other Solutions Specify Below

Manufacturing Addresses (mark all that apply)**Manufacturing Plant 1 Physical Address**

City or Town			
State or Providence		Zip code	
Country			
Phone # (0-000-000-0000)		Ext.	

Manufacturing Plant 2 Physical Address

City or Town			
State or Providence		Zip code	
Country			
Phone # (0-000-000-0000)		Ext.	

Manufacturing Plant 3 Physical Address

City or Town			
State or Providence		Zip code	
Country			
Phone # (0-000-000-0000)		Ext.	

Supplier Questionnaire

Do you have an effective procedure to monitor and assure consistent quality management and control?

Yes		No	
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Please Explain

Logistics, Performance and Delivery (Products, Processes, Systems, Facilities and Staff)

Reliability (Products, Processes, Systems, Facilities and Staff)

Problem Solving (Products, Processes, Systems, Facilities and Staff)

After Sales Support, The ability to provide reprint schedules over set time frames to keep good pricing stability.

Details regarding product or services warranties

Can you provide Press Emporium with Samples of each Order (Wide Format Photos of Final Product or After Installation)

Yes		No	
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By executing this Supplier Registration Form , **the Supplier:**

1

Agrees that the supply of all Goods and Services by the Supplier will be governed by the Press Emporium, Inc. Purchase Order Terms and Conditions, and any agreed amendments, should this application be approved by Press Emporium Inc.; and

2

Warrants that the person executing this Supplier Registration Form is authorized to do so on behalf of the Supplier and binds the Supplier.

EXECUTED ON BEHALF OF THE SUPPLIER

(Signature of Authorized Officer)

(Signature of Authorized Receivables Agent)

(Print Name)

(Print Name)