

TeamBoard Reseller Application

Section 1: Process Overview

Purpose

Dealers and distributors interested in becoming an authorized reseller for Egan TeamBoard Inc must complete the TeamBoard Reseller Application (FORM 0252).

The TeamBoard Reseller Application process is designed to set-up new reseller accounts quickly and efficiently. Once the process is completed, an authorized TeamBoard reseller may receive preferred product discounting and will be capable of demonstrating, selling, installing, training and providing after-sale support.

Eligibility

Authorized TeamBoard resellers are almost exclusively A/V and/or IT resellers focused on the education, government and/or corporate markets. They are always capable of supporting high-tech hardware and software.

Instructions

Complete all sections of the form in their entirety.

Complete the form electronically using Adobe Acrobat. Forms completed by hand will not be accepted.

Submit the completed application to your TeamBoard Territory Sales manager or the appropriate TeamBoard Sales Support representative by email using the "Submit by Email" button located at the top of this page. Forms submitted by fax will not be accepted. If you do not know who your Territory Territory Sales or Sales Support representative is contact customer service at (905) 851-2826 or customerservice@egan.com to find out.

Do not submit this form to customer service.

Application Process

Stage 1: Prospective Reseller

The interested reseller has completed and submitted a TeamBoard Reseller Application (FORM 0252).

Stage 2: Pre-Approved Reseller

TeamBoard has reviewed the completed TeamBoard Reseller Application form and has notified the prospective reseller of the intent to move forward in the application process.

Stage 3: Conditionally Approved Reseller

The pre-approved reseller has attended an online TeamBoard webinar and a TeamBoard representative has issued a quotation for a start-up package of product (type and quantity negotiable).

Stage 4: Approved Reseller

The conditionally approved reseller submits a PO for the start-up package product. When a PO is submitted, the approved reseller will receive preferred product pricing. If the conditionally approved reseller decides not to invest in start-up product, the reseller will become an approved reseller and will receive non-preferred pricing.

Stage 5: Authorized Reseller

The approved reseller who has invested in start-up product has completed company-wide product training with a TeamBoard representative and is capable of demonstrating, selling, installing, training and providing after-sale support.

Section 2: Contact Information

Company

Company	<input type="text"/>	Phone Number	<input type="text"/>
Address	<input type="text"/>	Fax Number	<input type="text"/>
City	<input type="text"/>	State	<input type="text"/>
		Zip Code	<input type="text"/>
Country	<input type="text"/>	F.I.N.	<input type="text"/>
		Website	<input type="text"/>

Principal

Name	<input type="text"/>	Phone Number	<input type="text"/>
Position	<input type="text"/>	Extension	<input type="text"/>
Email	<input type="text"/>	Fax Number	<input type="text"/>

Sales

Name	<input type="text"/>	Phone Number	<input type="text"/>
Position	<input type="text"/>	Extension	<input type="text"/>
Email	<input type="text"/>	Fax Number	<input type="text"/>

Marketing

Name	<input type="text"/>	Phone Number	<input type="text"/>
Position	<input type="text"/>	Extension	<input type="text"/>
Email	<input type="text"/>	Fax Number	<input type="text"/>

Other

Name	<input type="text"/>	Phone Number	<input type="text"/>
Position	<input type="text"/>	Extension	<input type="text"/>
Email	<input type="text"/>	Fax Number	<input type="text"/>

Other

Name	<input type="text"/>	Phone Number	<input type="text"/>
Position	<input type="text"/>	Extension	<input type="text"/>
Email	<input type="text"/>	Fax Number	<input type="text"/>

Section 3: Company Information

Territory & Market Coverage

Please specify the geographical territory/territories (including country, state, and city/town) that your company would like to resell TeamBoard products. If you would like to represent TeamBoard country or state-wide please leave the "state/province" and/or "city/town" field blank.

Country	State/Province	City/Town
Country		
Country		
Country		
Country		
Country		

Identify the market(s) in which your company currently resells product into and specify the approximate percentage of your company's focus on each market: (check all that apply)

<input type="checkbox"/> Education (K12)	<input type="checkbox"/> Higher Education	<input type="checkbox"/> Corporate	<input type="checkbox"/> Government	<input type="checkbox"/> Other
% <input type="text"/>	% <input type="text"/>	% <input type="text"/>	% <input type="text"/>	% <input type="text"/>

Company Profile

Is your company a dealer or distributor?

Distributor
Number of Dealers

Dealer
Number of Branches

Is your company currently a reseller of A/V or IT products and/or services?

Yes No

If you answered 'no' please specify what type of business your company conducts.

Is your company currently a reseller of another line of interactive whiteboard products?

Yes No

If you answered 'yes' please identify the manufacturer(s) of these interactive whiteboard products.

If you become an approved TeamBoard reseller in the territories in which you have requested, will you continue to resell these other lines of interactive whiteboards?

- Yes No Unsure

If you answered 'unsure' please explain.

How many people does your company employ?

How many direct sales representatives does your company employ?

Can your company provide installation services?

- Yes No

Can your company offer on-site training if required by an end-user?

- Yes No

Please list the top three audio-visual manufacturers in which your company is an approved reseller of their products.

Section 4: TeamBoard Sales Forecast

If you become an authorized TeamBoard reseller please estimate the amount of revenue you anticipate doing with Egan TeamBoard Inc during your first two years as a reseller.

Year 1

Q1 (JAN 14 - MAR 14)

Q2 (APR 14 - JUN 14)

Q3 (JULY 14 - SEP 14)

Q4 (OCT 14 - DEC 14)

Year 2

Q1 (JAN 15- MAR 15)

Q2 (APR 15 - JUN 15)

Q3 (JULY 15 - SEP 15)

Q4 (OCT 15 - DEC 15)

Section 5: Additional Information

Please provide any additional information you deem necessary below.

Form submitted by:

Name

Phone Number

Title

Extension

Email

Mobile

Thank you for your interest in becoming a reseller for Egan TeamBoard Inc.