

COLEX Dealer Registration Form

FINISHING SOLUTIONS

Dear Dealer Representative, please register your lead with this form. It is designed for paperless, automated document workflow. Please download this form on your computer, open it up in Adobe Reader and fill out all the fields with *. Please type (no handwriting), "Save as" and email electronically filled-out form to Maureen Damato at maureen@colex.com. Next time you need to fill it up again, just open your saved form, change the fields related to your Lead, "Save as" and email it again. You will not need to retype your contact info unless it changes. You can download Adobe Acrobat Reader at www.adobe.com for free.

Lead Info

First Name*

Last Name*

Company*

Title*

Phone*

Email*

Date*

Street Address*

City*

State*

ZIP*

Dealer Info

First Name*

Last Name*

Company*

Title*

Phone*

Email*

Request for your lead

Colex sponsored Factory Visit/Demo
Suggested Date

Call/Visit your Lead by Colex Specialist
 Technical or Workflow Questions
 Sales or Application Questions

Generic Sample Kit Mailed
 Custom Benchmark Processed

Attending Colex Booth at a show

Show Day/Time

[CLICK TO SAVE AS ==>>](#)

Your Lead is Interested in

<input type="checkbox"/> Sharpcut	<input type="checkbox"/> Fotoba
<input type="checkbox"/> 5'x10' (5' gantry)	<input type="checkbox"/> Digitrim
<input type="checkbox"/> 10' x 5' (10' gantry)	<input type="checkbox"/> WR 64
<input type="checkbox"/> 5'x5'	<input type="checkbox"/> XLE170
<input type="checkbox"/> 10'x10'	<input type="checkbox"/> XLD170
<input type="checkbox"/> Conveyor	<input type="checkbox"/> XLD170 HS
<input type="checkbox"/> Signs/Displays	<input type="checkbox"/> XLD170 WP
<input type="checkbox"/> Fabric/Textile	<input type="checkbox"/> XLD320 HS
<input type="checkbox"/> Packaging	

Additional Notes