



Flower Connection Leeds	TRUE/FALSE
Flower Connection Sheffield	TRUE/FALSE
Company Reg Number or Vat Number	.....
Company type	Limited/Sole Trader/PLC/Partnership
Business Name	.....
Business Address	.....
Business Postcode	.....
Business Town	.....
Business Email	.....
Business Phone Number	.....
Full Name	.....
Date of birth	.....
Mobile Number	.....
Contact Email	.....
Home Address	.....
Home Postcode	.....
Delivery Customer	TRUE/FALSE
Collection Customer	TRUE/FALSE
Signature	.....

**\*Once Filled in please return to local store staff and wait for approval\***

**\*If you have any questions or queries regarding this form please contact your local branch for further assistance\***