If you Produce \$300K in Annual Sales you Qualify!

FOR DISTRIBUTOR MEMBERS ONLY APPLICATION TO ATTEND GCPPA SUCCESS SUMMIT 2016 April 13 - 14, 2016 Fort Lauderdale

First Name	
City, ST, Zip	
Office Phone	
Cell Phone	
Email Address	
Web Address	
1 -5 Years 6 - 10 Years 11 - 20 Years 20+ Years What has your and 2012	nual sales volume been in the past 3 years?
Who are your Top	
2,	
3.	
What are the Top	3 Industries you sell to?
2	
3	
_	

Turn for Pg 2

IMPORTANT NOTE:

THE <u>ONLY</u> PURPOSE OF THIS QUESTIONNAIRE IS TO RECRUIT AND QUALIFY DISTRIBUTOR CANDIDATES FOR ATTENDANCE AT THE 2016 GCPPA SUCCESS SUMMIT. ALL ANSWERS GIVEN HERE ARE CONSIDERED STRICTLY CONFIDENTIAL AND WILL NOT BE DISCLOSED TO OR SHARED WITH ANYONE.

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How long have you been a memb	per of GCPPA?		
New Member			
11 - 20 Years			
20 L voors			
Have you served on the GCPPA B	oard?		
YES	When?		
NO		THANK YOU!	
Have you received any Industry A	wards?		
YES	Which?		
NO	<u> </u>	CONGRATULATIONS!	
What industry groups or associat	ions are you affiliated	with?	
ASI#	•		
SAGE#			
LIDIC#			
Buying Group Name			
Why are you interested in attend	ling the GCPPA 2016 S	Success Summit?	

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