

NEW DISTRIBUTOR EVALUATION SHEET

Company Name(s): _____

Contact Name(s): _____ Job Title: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Phone: _____ Fax: _____

Email: _____ Website: _____

1. What prompted your interest in distributing Kinesio® Taping products?

2. Please provide the names & titles of individuals with whom we would be interacting:

3. If applicable, please list parent company and/or larger affiliate(s):

4. What is your total area of distribution? (please specify city, state, country, where applicable)
 Local: _____ Regional(State(s)): _____
 National: _____ International(Countries): _____

5. Please rank the top five(5) medical fields to which you market, with one(1) being your largest market
 PT: _____ OT: _____ ATC: _____ LMT: _____ DC: _____ MD: _____ DO: _____ OTHER: _____

6. Please rank the top five(5) medical fields to which you market, with one(1) being your largest market
 Catalog: _____ Direct Mail: _____ Sales Rep: _____ Exhibition: _____
 Other: _____

7. Would your company be interested in co-op advertising opportunities?
 Yes: _____ No: _____

8. Does your company market through the internet?
 Yes: _____ No: _____
 If yes, would Kinesio® products be placed on the website for possible e-commerce sales?
 Yes: _____ No: _____

9. Does your company currently support/co-sponsor educational seminars? If yes, to what extent?
 No: _____ Yes: _____ Comments: _____

10. Your initial order will consist of what KT specific products and how much? Minimum amounts are listed below to qualify for sub-distributor pricing and partner pricing. Please check the amount you are interested in.

Sub-Distributor Qualifications:

Partner Qualifications:

Kinesio® Tex Tape:	minimum of 30 rolls:	31-60 rolls:	61+ rolls:	150,000+ rolls:
Kinesio® Taping Manuals:	minimum of 10 manuals:	11-25 manuals:	26+ manuals:	1000+ manuals:
Kinesio® Taping Scissors:	minimum of 5 scissors:	6-10 scissors:	11+ scissors:	1000+ scissors:

Name: _____ Date: _____

NOTE: There will be a 3 month trial period, during this time you will receive monthly calls from Kinesio® in order to acquire information that will aid in the marketing and sales of product purchased.



Kinesio Holding Corporation
 3901 Georgia St. NE, Building F Suite F2
 Albuquerque, NM 87110

Phone: 888-320-TAPE
 Fax: 505-856-2983
 Web: www.KinesioTaping.com