



# MAPLE LEAF CENTER

Linda J. Hudson-Chapman  
Linda@MapleLeafCenter.com

---

## Re-Seller Application

To establish a Maple Leaf Center, Inc. Re-seller Account, under the “Terms of Sale for Re-Sellers” agreement available on this website, please complete the following form:

**Organization Name:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_

**Title/Position:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**Fax Number:** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

**Website:** \_\_\_\_\_

**Authorized Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please return this application by email  
ALONG WITH A COPY OF YOUR  
**SALES OR USE TAX PERMIT LICENSE OR REGISTRATION.**

Linda@MapleLeafCenter.com