

# Backyard Greens "Licensee" Application

## Independent Area Dealer Application

Company Name \_\_\_\_\_  
Contact Name(s) \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_ Country (if other than U.S.) \_\_\_\_\_  
Telephone (Home) \_\_\_\_\_  
Telephone (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_  
Fax # \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Current Occupation \_\_\_\_\_  
How did you hear about Backyard Greens? \_\_\_\_\_

Please describe any previous business or trade experience, affiliation, skills, or knowledge that you possess that would help qualify you as a favorable candidate to be a Backyard Greens Licensee / Dealer (such as landscaping, construction, sales, golf industry, etc.).

Please list personal and business references, including phone numbers.

Name _____	Phone# _____	Personal or Business
Name _____	Phone# _____	Personal or Business
Name _____	Phone# _____	Personal or Business
Name _____	Phone# _____	Personal or Business
Name _____	Phone# _____	Personal or Business

Briefly describe some of your ideas and plans for marketing, advertising and promoting Backyard Greens in your area. \_\_\_\_\_

Have you selected a location to install a Demonstration Show Green? Yes / No

Describe the location: \_\_\_\_\_

Please describe the market or area that you wish to service:

State \_\_ entirely or part County \_\_\_\_\_ entirely or part City \_\_\_\_\_

Description: \_\_\_\_\_

When are you planning to begin installing putting greens and synthetic grass?

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please fax your application to 801-426-4967 or mail to:

**Backyard Greens, LC.**

367 W 700 N

Orem, UT. 84057

We at Backyard Greens take the selection of our Licensees very seriously, we want only the best and most motivated people and companies to help all or dealers to prosper. Thanks for your interest!