THORFIT WHOLESALE PARTNER APPLICATION FORM

Version 1.0 | Application Date: _____

Thank you for your interest in becoming a THORFIT Wholesale Partner. Please complete all sections of this application thoroughly. Incomplete applications may delay processing.

Processing Time: Applications are typically reviewed within 3-5 business days.

SECTION 1: BUSINESS INFORMATION

A. Legal Business Details

Legal Business Name: _____

Trading Name (if different): _____

Company Registration Number: _____

Date of Registration: _____

VAT Number (if registered): _____

Tax Reference Number: _____

Business Type:
☐ Company (Pty Ltd)
☐ Close Corporation (CC)
☐ Sole Proprietor
☐ Partnership
☐ Trust
☐ Other: _____

Years in Business: _____

B. Business Category *(Select all that apply)*

☐ Gym / Fitness Facility
☐ Health & Wellness Store / Supplement Retailer
☐ Yoga / Pilates Studio
☐ CrossFit Box / Functional Fitness
☐ Sports Performance Center
☐ Nutrition / Dietetics Practice
☐ Medical Practice / Wellness Clinic
☐ Physiotherapy / Biokineticist Practice
☐ Corporate Wellness Provider
☐ Online Health Store / E-commerce
☐ Pharmacy (with supplement section)
☐ Health Food Store
☐ Other: _____

C. Physical Business Location

Street Address: _____

Suburb/Area: _____

City: _____

Province: _____

Postal Code: _____

Is this address:
☐ Owned by business
☐ Leased (lease agreement required)
☐ Home-based business
☐ Shared space / Co-working

Do you have a physical storefront customers can visit?
☐ Yes ☐ No

If Yes, Trading Hours: _____

Store/Facility Size (approx sqm): _____

D. Online Presence

Website: _____

Facebook: _____

Instagram: _____

TikTok: _____

LinkedIn: _____

Other: _____

Do you sell online?
☐ Yes, own e-commerce website
☐ Yes, via social media
☐ Yes, via third-party platform (specify): _____
☐ No, physical location only

SECTION 2: CONTACT INFORMATION

A. Primary Contact (Decision Maker)

Full Name: _____

Position/Title: _____

ID Number: _____

Email Address: _____

Mobile Number: _____

Landline (if applicable): _____

Preferred Contact Method:
☐ Email ☐ Phone ☐ WhatsApp

B. Accounts/Finance Contact *(if different from above)*

Full Name: _____

Position/Title: _____

Email Address: _____

Phone Number: _____

C. Delivery/Receiving Contact *(if different from above)*

Full Name: _____

Position/Title: _____

Email Address: _____

Phone Number: _____

Delivery Address (if different from business address):

Delivery Notes/Special Instructions:

SECTION 3: WHOLESALE TIER & ORDERING

A. Desired Wholesale Tier

Based on the Wholesale Terms & Conditions, which tier do you intend to start with?

☐ **Bronze Tier** - R5,000 minimum order, 30% discount
☐ **Silver Tier** - R10,000 minimum order, 35% discount
☐ **Gold Tier** - R25,000 minimum order, 40% discount
☐ **Unsure - Need consultation**

B. Initial Order Estimate

Estimated initial order value: R _____

Estimated monthly order frequency:
☐ Once per month
☐ Every 2-3 months
☐ Quarterly
☐ As needed / Ad hoc
☐ Weekly

Estimated monthly order value (after initial order): R _____

Expected annual purchase volume: R _____

C. Payment Terms Requested

☐ **Pay on Order** (payment before dispatch) - All tiers eligible

Terms will only be awarded after a reasonable payment history has been established.
☐ **Net 15** (payment within 15 days) - Silver tier+, subject to credit approval
☐ **Net 30** (payment within 30 days) - Gold tier only, subject to credit approval

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SECTION 4.: ADDITIONAL INFORMATION

A. Marketing & Promotion

How do you plan to market/promote THORFIT products? *(Select all that apply)*

☐ In-store displays and signage
☐ Social media posts and stories
☐ Email marketing to member database
☐ Website product listings
☐ Personal recommendations from trainers/staff
☐ Sampling and trials
☐ Educational workshops/seminars
☐ Package deals with services
☐ Other: _____

Estimated number of people you can reach monthly through your channels:

Are you interested in co-marketing opportunities with THORFIT?
☐ Yes ☐ Maybe ☐ No

SECTION 5: REQUIRED DOCUMENTATION CHECKLIST

Please attach the following documents with your application:

☐ **Company/Business Registration Certificate** (CIPC/CIPRO document)
☐ **Tax Clearance Certificate** OR valid tax number confirmation
☐ **VAT Registration Certificate** (if VAT registered)
☐ **Proof of Business Location:**

- Lease agreement, OR
- Utility bill in business name, OR
- Property ownership documents

Documents can be:

- Scanned and emailed to: wholesale@thorfitlifestyle.com
- Uploaded via online portal: [URL]
- Couriered to: [Physical Address]

SECTION 6: DECLARATIONS & CONSENT

A. Information Accuracy

I declare that:

☐ All information provided in this application is true, accurate, and complete
☐ I have the authority to enter into a wholesale agreement on behalf of this business
☐ I understand that false or misleading information may result in application rejection or account termination
☐ I will notify THORFIT of any material changes to business information

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B. Terms & Conditions

☐ I have read and understood the THORFIT Wholesale Terms & Conditions
☐ I agree to be bound by the Wholesale Terms & Conditions
☐ I understand pricing structure and Minimum Advertised Price (MAP) policy
☐ I understand minimum order quantities and payment terms

C. Credit Consent *(If applying for credit terms)*

I authorize THORFIT to:

☐ Conduct a credit check with credit bureaus
☐ Contact trade references provided for verification
☐ Contact banking references provided
☐ Share my credit information with third-party credit assessment providers
☐ Periodically review credit standing while account is active

I understand that:

- Credit terms are granted at THORFIT's sole discretion
- Credit limits and terms may be adjusted based on payment history
- THORFIT reserves the right to deny credit without explanation

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D. Marketing Consent *(Optional)*

☐ I consent to THORFIT featuring my business in partner directories and marketing materials
☐ I consent to THORFIT sharing my business success story (with prior approval)
☐ I consent to THORFIT using photos of my business/storefront in marketing materials
☐ I consent to receiving marketing emails and product updates from THORFIT

SECTION 7: SIGNATURE

By signing below, I confirm that:

- I have completed this application truthfully and accurately
- I have authority to bind the business to a wholesale agreement
- I agree to the THORFIT Wholesale Terms & Conditions
- I consent to the declarations above

Applicant Signature:

Signature: _____

Full Name: _____

Position: _____

Date: _____

SUBMIT YOUR APPLICATION:

Email: wholesale@thorfitlifestyle.com
Subject Line: Wholesale Application - [Your Business Name]

Online: www.thorfitlifestyle.com/wholesale-apply

Post:
THORFIT Lifestyle (Pty) Ltd
Wholesale Applications
9 Bae Du Bois

Scott Estate, Hout Bay 7806

WhatsApp: 0828236380

FOR OFFICE USE ONLY

Application Received: _____

Received By: _____

Application Number: _____

Documentation Complete:
☐ Yes ☐ No - Missing: _____

Credit Check Completed:
☐ Yes ☐ No ☐ N/A

Trade References Verified:
☐ Yes ☐ No ☐ N/A

Application Status:
☐ Approved
☐ Approved with conditions
☐ Declined
☐ Pending additional information

Approved Tier:
☐ Bronze ☐ Silver ☐ Gold

Credit Terms Approved:
☐ Pay on Order ☐ Net 15 ☐ Net 30

Credit Limit (if applicable): R _____

Approved By: _____

Date: _____

Account Number Assigned: _____

Welcome Pack Sent: ☐ Yes - Date: _____

NOTES:

QUESTIONS?

Our wholesale team is here to help!

Email: admin@thorfitlifestyle.com
Phone: [Your Number]
WhatsApp: [Your Number]
Hours: Monday - Friday, 8:00 AM - 5:00 PM SAST

Average Response Time: Within 24 business hours

THORFIT Lifestyle (Pty) Ltd
Building Better Humans™

THANK YOU FOR YOUR APPLICATION!

We look forward to partnering with you to bring THORFIT products to more people who need them.

END OF APPLICATION FORM