

ACCOUNT OPENING FORM

Ces informations resteront confidentielles

Compagny :

Adress :

Postal code :

City :

Province :

Business Type :

Open since :

Web site :

Owner's name :

Phone :

Mail :

Account payable :

Phone :

Mail :

Date et Sign :

COMMUNICATION

do you agree to receive our communications by mail ? (statement of account, invoices, information, updates) ?

Check the appropriate box

Oui

Non