

# Reseller information form

Thanks for your interest

## General

Please fill in this reseller form as detailed as possible and submit it to [distribution@mybotshop.de](mailto:distribution@mybotshop.de)

Are you applying as

Reseller

Affiliate

Other:

Company name

Contact name

Invoice address

(street / number / city / postal code)

Delivery address

(street / number / city / postal code)

Phone number

Email address

VAT ID

Distribution Countries

Germany

Austria

Switzerland

Other:

## Categories and products

Please describe as detailed as possible in which categories and / or products you are interested in

Manufacturers

Categories

Target Group

Business

Consumer

Education

Other:

MYBOTSHOP is reselling and distributing research  
and educational robotic products