

VENDOR APPLICATION FORM

VENDOR PROFILE:

Please provide the following information:

Vendor Name:	l .	/
Address:		
HST Number:		
Telephone Number (including area code):	3	
Fax Number:)	
Email Address:		
Web Address:		
Contact Person:		
Description of services you provide:		
Do you accept VISA?		
Lessons Providers Qualifications (please detail):		

Payment within 30 days of receipt of approved invoices.

The information provided on this form will be used to process payment of approved invoices.

Vendors are asked to ensure that the "Vendor Name" listed above is the name you wish your payment to be made out to.

Vendors should call 1-800-567-1236 Ext 2247 or Ext 2255 to obtain invoice approval.

Vendors are welcome to fax their invoices to EBUS at (250) 567-3943.

EBUS Academy is a Distance Education Public School and part of School District No. 91 (Nechako Lakes).

www.ebus.ca
Bag 8000 187 East Victoria Street Vanderhoof BC V0J 3A2
Toll Free: 1-800-567-1236 Ext 2247 Fax: 250-567-3943