



VAR Application Form

Please complete all information requested below and return by email to sales@sagaxis.com or fax to + 1 (416) 385-1610.

General Company & Contact Information

Company Name:	_____	Name:	_____
Address:	_____	Title:	_____
	_____	Telephone:	_____
City & State:	_____	Fax:	_____
Country:	_____	email:	_____
# of Employees:	_____	Web Site:	_____
# of Sales Staff:	_____	Year Established:	_____
# of Tech Staff:	_____	Annual Revenue:	_____

Company Profile

Description of Business: _____

Target Markets: _____

Technology Expertise: _____

Current Suppliers: _____

Sagaxis Product Interest

- Wireless Systems (✓)
- _____ 700 MHz
- _____ 900 MHz
- _____ 2.4 / 5.8 GHz
- _____ 2.5 / 3.5 GHz
- _____ 18 to 26 GHz

- ISP Solutions (✓)
- _____ WiFi AP
- _____ Internet HotSpot
- _____ IP Billing
- _____ Traffic Management

- Video Products (✓)
- _____ Video Conferencing
- _____ ViewMail
- _____ SightLink

Market Development Plans: _____
