



New User Set Up Form
 Please complete and send via e-mail to
fai.cmcosupport@fulfillmentamerica.com

Account Information	CMCO Customer #:	
Shipping Information (required fields)	Company Name:	
	Street Address:	
	City:	
	State:	
	Zip Code:	
	Telephone:	
	Website:	
Contact Information (required fields)	First Name:	
	Last Name:	
	Email Address:	
User Type		
	Training Member	<input type="checkbox"/>
	General	<input type="checkbox"/>
	Distributor	<input type="checkbox"/>