



ACCESSIBLE ACCESSORIES LTD.
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10 DAY FREE TRIAL INFORMATION SHEET

Please complete the form below and fax back to us (403-526-4302). Once received, we will build your Dealership Accessory site and email the Contact Person (listed below) with your access and links.

Website Display Information – This information will be displayed with your logo.	
Dealership Name:	
Dealer Code #:	
Address: (# Street/Avenue)	
Address 2: (City, Prov, PC)	
Phone: (Main Line)	()
Fax:	()
Email: (i.e. info@mysite.com)	
Website (i.e. www.mysite.com)	

Contact Information – The person who will receive correspondence from us regarding the program and who would contact us with questions.	
Contact Name:	
Contact Phone:	
Contact Email:	

You are under No Obligation, simply a “Test Drive” of our software will be provided for your Dealership. If you have any questions, please contact us.

Thank you,

Don Doonan
President