

Product Name _____

Vendor's Item Number _____

UPC Code _____

Is this product returning from last year? Yes No

Are there any changes to box or product design? Yes No

if yes, Describe: _____

Shipping Details

City & State Product is Shipped From: _____

Box Dimensions of single item (*in inches*) _____ Weight of single packaged item (*pounds*) _____
Height _____ Number of Items in Master Carton: _____
Width _____
Depth _____

Is this product a Self-Shipper?
 Yes
 No

Lead Time (in days) from receipt of PO to arrival of shipment at our warehouse in Milwaukie, Oregon: _____

Origin Details

Country where product is made _____

Will the Certificate of Safety Compliance will be mailed or emailed to us? _____

[In order to carry your product, we need proof that you have met the US Safety Compliance Standards.](#) If you have questions, please contact Angie DelPropost at 503-496-1266

Safety Warnings printed on box are: _____

Product Details

Does the product require batteries?
 Yes No Type of Battery _____ Quantity: _____

Manufacturer's suggested age range (*in years*): _____ Is the age range printed on the box?
 Yes
 No

Is Assembly Required? Yes No Are assembly instructions included?
 Yes No

Do you have a digital instruction manual that can be emailed to us? Yes No

If the product is software, list system compatibility _____

List the awards that this product has won (*please list the name of award and the year*) _____

#REF!

0

Image Details

High Resolution (300 dpi) photography submissions will be considered (CDs or emails). Please call or email Marcia Mantz at marciam@museumtour.com if you would like to upload images to our server.

Will you be submitting photography?

Yes

No

Do you have video or audio clips of the product that we can review for possible inclusion on our website?

Yes

No

If yes Please submit in email to marcia@museumtour.com or contact us if the file is too large.

IF **TWO** PRODUCT SAMPLES HAVE NOT BEEN PREVIOUSLY SENT TO MUSEUM TOUR, PLEASE SEND THEM NOW. *Product samples are used for photography as well as sales training.*

Product Description

Please attach product information from a company sales brochure, catalog or website.

Many products are related to school curriculum or child development

Please check all that apply for your product

- | | | | | |
|--|------------------------------------|---|--------------------------------------|--|
| <input type="checkbox"/> Language Arts | <input type="checkbox"/> Poetry | <input type="checkbox"/> Reading | <input type="checkbox"/> Crafts | <input type="checkbox"/> Creative Thinking |
| <input type="checkbox"/> Foreign Language | <input type="checkbox"/> History | <input type="checkbox"/> Art Appreciation | <input type="checkbox"/> Logic | <input type="checkbox"/> Visual Art Skills |
| <input type="checkbox"/> Preschool Readiness | <input type="checkbox"/> Music | <input type="checkbox"/> Performing Arts | <input type="checkbox"/> Math | <input type="checkbox"/> Social Studies |
| <input type="checkbox"/> Computer Skills | <input type="checkbox"/> Dexterity | <input type="checkbox"/> Comprehension | <input type="checkbox"/> Engineering | <input type="checkbox"/> Hand Eye Coordination |
| <input type="checkbox"/> Environmental Science | <input type="checkbox"/> Space | <input type="checkbox"/> Natural Science | <input type="checkbox"/> Health | <input type="checkbox"/> Inspiration |
| <input type="checkbox"/> Chemical Science | <input type="checkbox"/> Biology | <input type="checkbox"/> Exercise | <input type="checkbox"/> Business | <input type="checkbox"/> Money Management |
| <input type="checkbox"/> Stress Management | <input type="checkbox"/> Physical | <input type="checkbox"/> Social Skills | <input type="checkbox"/> Emotional | <input type="checkbox"/> Mind / Body Control |
| <input type="checkbox"/> Other Specify: | | | | |

Thank you for completing our Product Profile Sheet.





2517 SE Mailwell Drive
Milwaukie, OR 97222

Product Profile Sheet

The staff of Museum Tour is pleased to feature your products in our upcoming catalog
Please fill in the following information with as much detail as possible in order to help us serve you better
Return this file by emailing as an attachment to: Marciam@museumtour.com or Fax to:(503) 794-7111
If you have any questions, please call Marcia Mantz at (503) 794-7100

Company Name _____
Billing Address _____

Company Website _____

Your Contact Information

Design/Copy Approval

Name: _____ Phone: _____
Email: _____ Fax: _____

Order Placement

Name: _____ Phone: _____
Email: _____ Fax: _____

Accounting

Name: _____ Phone: _____
Email: _____ Fax: _____

Consumer & Customer Service

Name: _____ Phone: _____
Email: _____ Fax: _____

Museum Tour®

2517 SE Mailwell Drive
Milwaukie, OR 97222
(503) 794-7100
www.museumtour.com

Thank you for taking the time to complete Museum Tour's Product Profile sheets. This information helps us to accurately portray your products to our customers.

Please follow these instructions

Please fill out a tab for each item your company is selling through Museum Tour.

Please fill out the requested information completely for each item.

When you have finished with this worksheet, simply save it and return it to us.

Please Leave the "Progress" tab blank, we will use it internally.

We thank you for your business and we are looking forward to a prosperous season!