GRAND ARCHIVE

OMNIDEX

Retailer Applications

Please fill out the application below.

Store Name	
Store Address	
Primary Distributor	Nexus Distribution
Tax ID	
Shipping Address (N/A if the same)	
Contact Email	
Contact Phone Number	
Store Website	
Store Phone Number (Will be publicly displayed)	
Store Email (Will be publicly displayed)	

Please send a photo of your store's signage, a photo of your store's play area, and an invoice from your primary distributor including Grand Archive TCG product alongside this completed form to omnidex@weebsoftheshore.com.

Thank you for your interest in signing up for Omnidex!