## **Regions Bank Supplier Registration Form**

Thank you for your interest in becoming a prospective supply partner for Regions Bank. Registering as a prospective supplier will help to make your company visible to procurement professionals should an opportunity arise for products or services that your business can supply.

Please be advised that the completion of this supplier registration form is NOT an approval for doing business with Regions Bank, nor does it indicate you are an approved supplier with Regions Bank.

To register, complete the questions below, then save and email this form to <u>supplierregistration@regions.com</u>. <u>Please note that printed and/</u> or hand written forms cannot be ingested into our system. It is recommended that you have the latest version of Adobe Acrobat or Acrobat Reader installed to complete the registration process.

## Company Information

Fictitious Entity or DBA Name:   Corporate Headquarters Address:   *Address Line 1:   *Corporate Medularters Context Phone:   *Corporate Website/URL:   *Tax ID Number:   *Tax ID Number:   *Tax ID Number:   *Tax ID Number:   *Contact Information on the Ariba Network, plesse go to https://www.ariba.com/ariba-network.   *Is your company currently enabled on the Ariba Network in order to transact with Regions. Should you be selected, please acknowledge that you will to its expectation.   For more information on the Ariba Network, please go to https://www.ariba.com/ariba-network.   *Is your company currently enabled on the Ariba Network in order to transact with Regions. Should you be selected, please acknowledge that you will to its expectation.   Forthact Information   *Contact Information   * Contact Phone Number:   * Contact Phone Number:   * Contact Phone Number:   * Contact Phone Number:   * Indicates a required field   * Indicates a required field   * Indicates a required field   * Contact F-mail Address:   Company Diversity Information   * Indicates a required field   * Notersity Spend as for of Tal Spend (most recent complete year of your spend with diverse suppliers):   * Notersity Spend as % of Total Spend (most recent complete year of your spend with diverse suppliers):   * Are you a Diversity Spend (most recent complete year of your spend with diverse suppliers):   * Are you a Diversity Spend (most recent complete year of your spend with diverse suppliers):   * Are you a Diversity			* Indicates a required field
Corporate Headquarters Address: "Address Line 2: "City:	*Corporate Legal Name:		
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Other:	8A (SBA 8(A) Program)		AbilityOne
	Other:		

Please indicate if your company is certified by any of these 3<sup>rd</sup> party regional or national entities:

NMSDC (National Minority Supplier Development Council)

WBENC (Women's Business Enterprise National Council)

NGLCC (National Gay and Lesbian Chamber of Commerce)

USHCC (United States Hispanic Chamber of Commerce)

Other Entity

## **Business Capabilities**

Please provide a brief overview of your company and the typical scope of work performed:

Please select your business capabilities:

Application Development Services	Lockbox Services
Appraisal Services	Market Data or Market Research Services (describe)
Armored Car	Marketing Related Services (describe)
ATM Services	Office Supplies, Products or Equipment (describe)
Bank Branch Equipment	Physical Security / Guard
Call Center	Promotional Items or Related Services (describe)
Cash Courier Services	Real Estate Brokerage Services
Cloud Services (describe)	Recruiting Services
Collections Services	Relocation Services
Construction Services	Reporting, Analytics or Data Management Services (describe)
Consulting	Risk Management Related Services (describe)
Credit Card Services	Software and/or Maintenance (describe)
Debit Card Services	Subscription Services
Deposit Related Services (describe)	Tax Related Services
Digital Commerce / eBusiness (describe)	Technology Hardware and/or Maintenance (describe)
Express Mail / Courier Mail Services	Telecommunication Services
Facilities Maintenance and Repair	Temporary Labor (IT)
Facilities Management	Temporary Labor (non-IT)
Finance / Treasury Services (describe)	Training
Food or Cafeteria Related Services or Products (describe)	Transaction Processing Services (describe)
Information Security Services or Products	Travel Services (describe)
Leasing Services	Treasury Management Services
Legal Services	Wealth Management Related Services (describe)
Lending Related Services	

APAAC (Asian Pacific American Chamber of Commerce)

Veterans First Certification Program, for veteran-owned small

USBLN (U.S. Business Leadership Network, for disabled-owned

NACC (Native American Chamber of Commerce)

business

small businesses)

If any of the business capabilities you have selected includes (describe), please provide additional details for that product or service:

## To submit, please save and email completed form to <u>supplierregistration@regions.com</u>.