

This Lead Registration Form is for the MNJ Software Referral Program.

This form gathers information for MNJ Software about a lead you want to refer to MNJ Software and/or one of its reseller channels.
The more information you can provide the better chance of making a sale and paying a referral fee. Please provide as much of the requested information.

Submit completed Lead Registration Form to Program Administrator:
info@mnjsoftware.com

About you - the person referring a lead to MNJ Software:
Please list the items below. Asterisked items are required items.

* Your Company Name	
* Your Name	
* Your Position	
* Your Phone	
Your Cell Phone	
Fax Number	
* Your Email	

About The Lead You Are Referring To MNJ Software
Please list the items below. Asterisked items are required items.

* LEAD COMPANY NAME:	
* This opportunity is for which MNJ Software product?	
How do you know this company:	
* How do you know of this opportunity:	
* How do you know of this opportunity:	
* Do you wish your company to be involved in MNJ Software's sales cycle (where possible)?	
* Who from your company should be involved (name, contact info):	
* In what role?	
* Can we mention your company and your name when contacting this lead?	

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Priority Lead Package - MNJ Software Referral Program

Lead Creation Date:
***required**

Determination:	Priority/Regular	Lead Qualifier:
*Company/Org: *required		Trade style
*Address: *required		Referral Member BP#:
*Telephone: *required		Lead Acceptor/AE: VP:
*E-Mail Address *required		Region:
Website:		*Primary SIC Code: *required
DUNS #		Public/Private Status:
D&B Revenue Range:		*Current US Revenue: *required
*Industry: *required		End of Fiscal Year:
Sector:		

Executive Summary

Primary Contact: *required		
* NAME	* PHONE NUMBER	* EMAIL ADDRESS
* Next Step for MNJ Software: *required		

Interactions with Prospect / Compelling Event: Current Solutions and Competitor(s):			
Implementation Partner(s):			
* Intelligence Summary: *required			
* Product Solution Interest (i.e. MNJ SoftwareSuite, HMS, SMS Software, Email Marketing etc): *required			
* Purchase Time Frame: *required			
> 12 months	< 12 Months	<6 Months	
* Implementation Time Frame: *required			
> 24 months	< 24 Months	<12 Months	
* IT Buying Decision Authority: *required			
Decision Maker	Influencer	Project Owner	Other
* Budget Status: *required			
Budget Approved	Identified Budget Amt	Budget Not Identified	Budget Not Known
Budget Amount:			
Lead Origination:			
Cold Call	Partner Referral	Inbound	Other

Lead Details
RFP/RFI Information

RFP/RFI Receipt Date:

RFP/RFI Response Timeframe:

RFP/RFI Primary Contact:

Business Description

Core Business:

Parent/Subsidiaries:

Purchase Process

Sample:

*** Needs Qualification *required**

Business Pain Points:

IT Environment

Software Competitors:

Number of Users:

IT Staff Count:

Hardware Platforms:

Audit Partner:

MNJ Software Engagement Information

MNJ Software Meeting Scheduled Date:

Influencing Partner:

MNJ Software Meeting Details:

Demo Requested:

SE/ISG Engaged:

Primary Contact

Contact:

Function:

Title:

Level:

Address:

Contact Type:

Interview Date:

Phone:

Email:

Additional Contacts

Contact:

Function:

Title:

Level:

Address:

Contact Type:

Interview Date:

Phone:

Email: