Product Order Form - Distributor

Enagic Australia Pty Ltd
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DISTRIBUTOR ID **FOR OFFICE USE ONLY**

Applicant Information ☐ Register as a Distributor

The personal information provided on this form is handled by Enagic Australia in accordance with its Privacy Collection Statement, set out with the Product Return Policy.

Name (First, Middle Initial, Last or Company Name) _____ Date of Birth (DD/MM/YY) _____ Drivers Licence/Passport No. _____

Address _____ City _____ State _____ Postcode _____

Home Tel. No. _____ Mobile Tel. No _____

E-mail Address _____ ☐ I agree to receive communications from Enagic Australia via e-mail

Shipping Address ☐ same as above

_____

Pick up from Enagic Australia Office ☐ not applicable

Name of Person Picking Up _____ Signature _____

Bank Information

Name of Bank _____ Account Holder's Name _____

Name of Branch _____ BSB _____ Account No. _____

Sponsor Information

Register the applicant as your [ ] A Sponsor Name: _____ Sponsor ID: _____

Product Ordered	Unit Price	GST	Shipping	Total	Payment Method
	$	$	$	$	☐ Cash ☐ Credit/Debit Card ☐ Bank Transfer ☐ E-Payment ☐ Other

Credit/Debit Card Information ☐ Visa ☐ MasterCard

Expiry Date _____

CVV _____

Card Holder's Name _____ Card Holder's Signature _____

_____ _____ _____ _____

Applicant Signature **Date** (DD/MM/YY) **Sponsor Signature** **Date** (DD/MM/YY)

Enagic Australia Pty Ltd is a Member of the Direct Selling Association of Australia and Subscribes to the DSAA Code of Practice - www.dsaa.asn.au

This document will be a tax invoice for GST upon completion and payment.

PROCESSED BY: **DATE:**

July 2019