

DISTRIBUTOR APPLICATION FOR:

USA/CANADA
 OTHER: _____



Distributor ID#
001 _____

SALES LEVEL IN HOME COUNTRY:

FOREVER LIVING PRODUCTS

7501 E. McCormick Parkway • Scottsdale, Arizona 85258
1-888-440-ALOE www.foreverliving.com

Please print in ink or type

LAST NAME FIRST MIDDLE SOCIAL SECURITY NUMBER
() Month Day Year Single Married English Spanish Chinese
TELEPHONE NUMBER DATE OF BIRTH MARITAL STATUS LANGUAGE Preference (choose one only)

SECONDARY APPLICANT'S LAST NAME FIRST MIDDLE SOCIAL SECURITY NUMBER

STREET ADDRESS EMAIL ADDRESS

CITY STATE/PROVINCE COUNTY ZIP/POSTAL CODE

IF I AM ACCEPTED AS A NEW DISTRIBUTOR, I UNDERSTAND, REPRESENT AND AGREE THAT:

1. I am acting in my own behalf as an individual and I am 18 years of age or older.
2. I have personally attended and received certification at a Company approved certification meeting or by a Company authorized representative.
3. This application shall constitute a binding agreement between Forever Living Products (FLP) and myself at such time as this application is received and approved by FLP's Home Office in Arizona. **I certify that I have not, prior to this date, sponsored into this country and I am using my original sponsor from my Home Country, if applicable.**
4. I am an independent contractor in the business of selling consumer products. I am not an employee or legal representative of FLP for any purpose. I will be responsible for compliance with federal, state and local statutes and regulations, including, but not limited to, those relating to licensing and taxation. I recognize that my remuneration is based on my performance in the sale or delivery of products and not on the number of hours worked or an element of chance. FLP shall not be responsible for withholding or collection and remitting of any taxes unless required by statutes and regulations or by express collection agreement with the relevant authority.
5. There is no required minimum investment or minimum inventory requirement. Any purchases must be in reasonable quantities **in relationship to sales.**
6. I have received and read FLP's "Company Policies". I agree to operate my business in accordance with these Company Policies, procedures and marketing plan. I understand that my acts, or lack of action, which may result in a misuse, misrepresentation or violation of such policies and procedures can cause the termination of my distributorship by the Company, **including but not limited to, use of unauthorized promotional material.**
7. FLP may, after reasonable notice, change, amend or modify this agreement and its policies, procedures and marketing plan to maintain a viable marketing system, comply with legal requirements or changes in economic conditions, and I shall operate my business in accordance with any such changes, amendments or modifications.
8. To properly represent the Company products and its marketing plan, all forms of advertising, including, but not limited to, audio and video tapes and printed material, must be submitted and approved in writing by an authorized Company representative prior to use.
9. All purchase orders must be accompanied by a cashier's check or money order made payable to FLP for the proper amount, including taxes, if any.
10. I MAY CANCEL THIS AGREEMENT AT ANY TIME EFFECTIVE UPON MAILING WRITTEN NOTICE TO FLP. If I should elect to cancel, all products which I purchased from FLP and which are in my possession in a resalable condition, shall be repurchased in accordance with FLP's policies and procedures.
11. FLP will make its products available to me as a Distributor and credit my sales efforts as set forth in the FLP marketing plan.
12. As long as I am a Distributor and not in violation of this agreement, FLP shall pay me for my successful sales efforts in accordance with the various bonuses established by the FLP marketing plan.
13. This agreement is personal in nature and cannot be assigned or transferred, except in the event of my death, wherein an individual who can qualify as a Distributor may inherit the same.
14. All disputes between the Distributor and FLP shall be governed by Arizona law and resolved by binding arbitration in accordance with FLP's dispute resolution policy. Maricopa County, Arizona, shall be deemed the sole and appropriate place for jurisdiction and venue of any dispute between FLP and the independent Distributor.
15. **Couples shall be sponsored together on the same Distributor Application form. Couples cannot sponsor each other. If one of the couple chooses not to be an FLP Distributor, the individual acting as the FLP Distributor expressly agrees and understands that his/her Distributorship may be terminated for any actions taken by the non-distributor individual which would violate Company policies.**
16. FLP expects its distributors to conduct themselves with the highest ethics and integrity. I agree to do so and represent that I have never been convicted of a felony or charged with a crime involving moral turpitude or dishonesty.

SIGNATURE OF PRIMARY APPLICANT DATE SIGNATURE OF SECONDARY APPLICANT DATE

SPONSOR'S LAST NAME FIRST MIDDLE ID NUMBER

STREET ADDRESS CITY/TOWN STATE/PROVINCE ZIP/POSTAL CODE

SPONSOR'S SIGNATURE DATE DATE CERTIFIED AREA