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Forever Living Products (M) Sdn. Bhd. (095924-X) Head Office : 25, Jalan Jejaka 3, Taman Maluri, 55100 Kuala Lumpur. Tel : 60-3-9282 0033 Fax : 60-3-9283 5055 Licence : AJL93186

Please Write Clearly and Neatly/ Sila isikan dengan tepat dan jelas.

**Applicant's Name / Nama Pemohon** : \_\_\_\_\_  
(As shown in the I/C)

**New I/C No K/P Baru** : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_      **Old I/C No. K/P Lama** : \_\_\_\_\_

**Date Of Birth / Tarikh Lahir** : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_      **Email/ E-mel** : \_\_\_\_\_

**Contact Tel No / Telefon** : **Home / Rumah** : \_\_\_\_\_ - \_\_\_\_\_      **Handphone / Bimbit** : \_\_\_\_\_ - \_\_\_\_\_

**Gender / Jantina** :  Male / Lelaki    Female / Perempuan      **Marital Status / Taraf Perkahwinan** :  Single / Bujang    Married / Berkahwin

**Race / Keturunan** :  Malay / Melayu    Chinese / Cina    Indian / India    Other / Lain-lain

**Spouse's Details (If Married)/ Butir-butir Suami/Isteri (Jika sudah berkahwin)**

**Spouse's Name / Nama** : \_\_\_\_\_  
(As shown in the I/C)

**New I/C No K/P Baru** : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_      **Old I/C No. K/P Lama** : \_\_\_\_\_

**Date Of Birth / Tarikh Lahir** : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_      **Race / Keturunan** :  Malay / Melayu    Chinese / Cina    Indian / India    Other / Lain-lain

(Please fill this accurately as this address will be used for mailing of all bonus cheques, statements and other correspondences to you)

(Sila isikan dengan betul. Alamat ini akan digunakan untuk semua urusan surat-menyurat)

**Mailing Address / Alamat Surat Menyurat** : \_\_\_\_\_  
\_\_\_\_\_

**Postcode/ Poskod & State/ Negeri** : \_\_\_\_\_

Have you ever been a distributor of this Company before ?  
Pernahkah anda menjadi pengedar syarikat ini?

Yes  No

Public Bank account number for Electronic Credit Payment of distributor bonus (Public Bank Account Only)

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Note : Please attach a photocopy of the first page (information page) of your Passbook.

**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 and have purchased my own Business Manual.
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 Head Office in Kuala Lumpur. 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 of 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 purchase 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 cash, credit card, cashier's cheque or money order for the full 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. 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 Distributor may inherit the same.
12. 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.
13. 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.
14. I will fully abide by the Direct Sales Act 1993. I will also observe and uphold the code of good conduct and ethics as promulgated by the Company and the Direct Selling Association of Malaysia.

**Signature of Principal Applicant / Tandatangan Pemohon Utama** : \_\_\_\_\_

**Signature of Spouse / Tandatangan Suami/Isteri** : \_\_\_\_\_

**Date / Tarikh** : \_\_\_\_\_

**SPONSOR'S DETAILS/BUTIR-BUTIR PENAJA**

**Sponsor's Name (if joint distributorship, please fill primary distributor's name) / Nama Penaja (Sila isikan nama Pengedar Utama)** : \_\_\_\_\_

**Sponsor's Distributor ID#/Nombor Pengedar Penaja** : \_\_\_\_\_

**Sponsor's Signature / Tandatangan Penaja** : \_\_\_\_\_      **Date/Tarikh** : \_\_\_\_\_

White – Company      Pink – Sponsor      Blue – Distributor

Certification of CM/OPP Attendance By	For Office Use Only
Signature : _____ Name : _____ I/C No : _____	Received By/Date