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# Auto Ship Agreement Form

Date: \_\_\_\_\_

Name \_\_\_\_\_ Referring Practitioner \_\_\_\_\_

Shipping Address \_\_\_\_\_ Apt # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

ITEM CODE	PRODUCT DESCRIPTION	PRICE	QTY.	

<b>AUTO SHIP DAY OF THE MONTH</b> _____ All Auto Ship orders falling on a weekend or holiday will ship out the next business day. <b>AUTO SHIP PERIOD</b> (circle one) <b>MONTHLY</b> <b>BIMONTHLY</b> *Please note that the order must be at least \$50	<b>Subtotal</b>	
	S & H	<b>FREE</b> over \$50
	Tax	
	<b>*TOTAL</b>	

<b>PAYMENT INFORMATION</b>	
Method of Payment: <input type="checkbox"/> VISA <input type="checkbox"/> Master Card	
CC# _____	Exp. _____
Name on card _____ Signature _____	
Billing Address _____ Apt # _____ (if different from above shipping address)	
City _____	State _____ Zip _____

## AGREEMENT

### TERMS AND CONDITIONS. PLEASE READ THOROUGHLY.

As a participant in the Designs for Health® Auto Ship program I authorize Designs for Health® to automatically ship my order detailed above periodically as described above after processing the payment method that I have indicated. Designs for Health® is under no obligation to ship any products until full payment has been received. Shipment will take place approximately two days from payment confirmation. This agreement will remain in effect until I cancel in writing.

### REVISION

I may revise my Auto Ship Agreement during any month, with a limit of one revision per quarter. To do so, I must submit a new Auto Ship Agreement and write "Modify Auto Ship" at the top of this form. Or I may send an email to [AutoShips@designsforhealth.com](mailto:AutoShips@designsforhealth.com) to modify my Auto Ship Agreement. Designs for Health® Customer Service Center must have revisions no later than 5 calendar days prior to my next Auto Ship shipment date. If the revision is received less than 5 calendar days prior to shipment, there will be no guarantee that the revision will be effective for that shipment.

### CANCELLATION

If I decide to cancel my Auto Ship Agreement, I must contact the customer service center no later than 2 calendar days prior to my next Auto Ship shipment date. If the cancellation is received less than 2 calendar days prior to shipment, there will be no guarantee that the order will not ship.

CUSTOMER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_