



ASSOCIATE APPLICATION & AGREEMENT

Associate's ZID#	Sponsor Name	ZID#
	Placement Under	ZID#

Date of Application

ASSOCIATE'S INFORMATION

Yearly Registration Fee:
\$39.00 u.s.

Associate Last Name or Business Name	Associate First Name	Initial	Associate's SSN or Fed Tax ID#
Street Address		City	State Zip
Day Phone	Night Phone	Email Address	Country

SHIPPING Address	City	State	Zip
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PRODUCT ORDER FORM

MARKETING ASSOCIATE

As a Marketing Associate you may choose a combination of products totaling \$70 or more. To enjoy the benefits of a Market Associate, your monthly qualifying purchase would be a combination of products totaling \$70 or more.

Product Selection

	Quantity	Price per unit	Total line cost
ZENVEI RED	<input type="text"/>	\$35.00	= <input type="text"/>
ZENVEI BLUE	<input type="text"/>	\$38.00	= <input type="text"/>
ZENVEI GREEN	<input type="text"/>	\$35.00	= <input type="text"/>
ZENVEI SILVER	<input type="text"/>	\$35.00	= <input type="text"/>

Total Product Purchase.....

Shipping/Handling

Your State Sales Tax.....

Yearly Registration Fee..... **39.00**

TOTAL ORDER COST.....

BUSINESS ASSOCIATE

As a Business Associate you may choose a combination of any products totaling \$128 or more. To enjoy the benefits of a Business Associate, your monthly qualifying purchase would be a combination of any products totaling \$128 or more.

Product Selection

	Quantity	Price per unit	Total line cost
ZENVEI RED	<input type="text"/>	\$32.00	= <input type="text"/>
ZENVEI BLUE	<input type="text"/>	\$35.00	= <input type="text"/>
ZENVEI GREEN	<input type="text"/>	\$32.00	= <input type="text"/>
ZENVEI SILVER	<input type="text"/>	\$32.00	= <input type="text"/>

Total Product Purchase.....

Shipping/Handling

Your State Sales Tax.....

Yearly Registration Fee..... **39.00**

TOTAL ORDER COST.....

AUTO SHIP

AUTO SHIP AUTHORIZATION

Please repeat this order automatically every month hereafter until I personally call or cancel. The order can be cancelled anytime before the date of shipment. This order is subject to the payment policies in ZENVEI Policies & Procedures manual page 9 section C item 2. I agree with policy and authorize you to charge my payment method accordingly.

Reject

Accept

PAYMENT AUTHORIZATION

CREDIT CARD NUMBER

Expires

Card Holders Name (Signature below) and Phone

I agree to the terms and conditions outlined in the Policies & Procedures for ZENVEI International Inc. Furthermore, I authorize ZENVEI International Inc. to charge my credit for the monthly auto ship contract less my previous month's earnings until I revoke the authorization in writing. I further certify that I sold or personally used 70% of the ZENVEI products previously purchased by me and will continue to do so.

Card Holder's
Authorized Signature X