PLEASE PRINT BLOC	K CAPIT	ALS	:			l				
		ΑP	PLICA	NT'S	DET	AILS				
Applicant's Surname:			Applica	nt's Firs	t Name:				Date of Birth:	Male/Female:
]	M/F
Spouse's Surname:			Spouse	's First N	lame:				Date of Birth:	Male/Female:
Address									Postcode:] [
Tel:	Em.	ail Add	dress:							
Bank Details: This information is av	ailable on you	r bank	statement	t		_	Account	Name:	VAT Registered:	Yes/No
IBAN No.										
BIC No.										
☐ Please tick if you do not wish to receive										
This is an agreement between the above nathealth and beauty care products and such of	med applicant ('th ther products and	ne Distr I service	ributor') and es as the Cor	Forever L mpany may	iving Produ market fro	icts Ireland om time to	Limited ('the time ('Produc	Company'). ts').	The Company ma	ırkets natural
I HEREBY APPLY FOR APPOINTMENT AS	AN INDEPENDE	nt dis	TRIBUTOR	OF THE C	OMPANY.	I UNDERS	STAND THAT	MY APPOIN	NTMENT WILL B	E EFFECTIVE
UPON THE COMPANY CONFIRMING MY I. The terms of my appointment ar									pany Policy Handl	oook' (CPH)
I have received a copy of these do	ocuments and ack	nowled	ge that they	shall toge	her form t	he entire aş	greement betv	veen me and	the Company ('A	greement')
If my appointment is confirmed b tor. I will then be entitled to pure										
the CPH, I will also be entitled to	present the Co									
franchise or any territorial exclus 3. In the conduct of my business as	,	Products	s' distributor	· I agree to	comply w	ith the curr	ent CPH as an	nended from	time to time by t	he Company
I agree that the Company has the	right to change t	he CPF	l at any time	on not les	s than 30 c	days' writte	n notice and I	agree to cor	nply with the CPH	l as amended
and that the terms of it form par me to amend my business practio		nt. I un	derstand tha	t no amer	dment to t	the CPH wi	ill require me 1	to incur any	expenditure but it	t may require
4. I agree also that the Company ha	s the right to cha	nge the	rates of bon	uses and i	ncentives p	aid by it an	d the events ir	respect of		
on not less than 30 days' written	notice.								Continued O	verleaf
Before you sign this form, make sure you		efully, in	particular th	ne statuto	y warning	below. Ma	ake sure you h	nave received	d a copy of the C	ompany Policy
Handbook. It forms part of your Agreeme STATUTORY WARNING	nt.									
It is illegal for a promoter or a particip				anyone to	make a pay	ment by pi	romising benef	its from gett	ting others to join	the scheme.
 Do not be misled by claims that high e IF YOU SIGN THIS AGREEMENT 	• ,			нто са	NCELA	ND GETY	OUR MONE	Ү ВАСК.		
Applicant's Signature:				Date:			1.	11		
							led 1			
Spouse's Signature:				Date:			Bob Park	er		
								of the Comp	pany	
DETAIL	S	0	F	F	I R	S	Т	0	R D E	R
New Distributor Pack £199.75			Personal Us	age Produ	ct Pack £9	0.36		Other (min.	order £50)	
Deliner Address /If different forms b										
Delivery Address (If different from ab	<u> </u>									
CHOOSE YOUR METH			•		ote: We			. , .		
☐ Mastercard ☐ Visa	Switch/Mae	estro(N	l)	Cheque		☐ Bank	Draft] Postal Or	der	Switch Only
Card No:					Start Date:		1 1	piry ate:		lo:
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Cardholder's Name		Card	dholder's Si	ignature				C\	V	V Code is the last ligits on back of ca
			SPONS	OP'S	DETAI	I S		Co		n signature strip.
Full Name:	I.D. No:		Tel:	on a	DETAI		esturo:		Dote:	
Grace Carlisle	35300012	24367		781212	2014	Sign	ature: Grace C	arlisle	Date:	
	Fore	ever	Living	Prod	ucts In	eland	Ltd			



Magheramorne House, 59 Shore Road, Magheramorne, Larne, Co Antrim BT40 3HW. Tel: 028 2827 9900 Fax: 028 2826 9901



January 2015

Continuation of Agreement Terms:

- During the first seven days after my appointment becomes effective, I may not purchase, or commit myself to purchase, more than £200 of goods or services from the Company, or other independent distributors, nor will I be required to do so.
- 6. I agree that the Company may:-
 - retain and process all personal information given by me to the Company for purposes including marketing, business creation and development, management reporting, bonuses payable and awards. The Company may record this information both manually and/or on a computer database and will be the data controller for this information; and
 - disclose and transfer this personal information to other members of the Company's group which are situated outside the European Economic Area and to other persons for the purposes of the Company's business
- 7. I am 18 years of age or older.
- 8. I am a wholly independent distributor and not an agent, employee or legal representative of the Company. As such, I will be responsible for my own expenses, including all taxes (including Value Added Tax), National Insurance contributions and fees or licences which are payable or required to conduct my business. I am solely responsible for all payments for any goods or services supplied to me in the course of my business. I am not authorised to make representations or incur any liabilities on the Company's behalf and agree not to purport to do so. As an independent business person I am entitled to arrange for such assistance in the conduct of my business as I consider appropriate, to be provided to me by such persons as I choose, and to delegate the performance of my obligations to those persons. I am responsible for the expense of engaging or employing those persons.
- 9. As a Distributor, I will honour the Company's 60-day full money back guarantee to my retail customers. I also understand that for any Products I wish to return to the Company, I will receive a like-for-like replacement Product.
- 10. I understand that this Distributor Agreement may not be conveyed, transferred or assigned to any other person without the express written approval of the Company.
- 11. I shall not use any advertising material, in any form that does not have the prior approval of the Company.
- 12. The Agreement shall be governed by Northern Ireland Law.
- 13. I have no financial obligation as a Company distributor during the 12 months following commencement of this Agreement other than to pay for any Products I order and to reimburse the Company any bonus paid to me in respect of Products which are subsequently returned.
- 14. If I wish to terminate my distributorship I may do so at any time by giving 14 days' written notice to the Company at its Head Office; in the case of a joint distributorship the written notice must be signed by both parties. The period of notice of the termination shall start to run from the day when such notice is posted by first class post to the Company at its Head Office. The effective date of termination is the date on which the Head Office approves and processes the termination request.
- 15. If I cancel, or the Company terminates, my appointment within its first 14 days I may cancel any unfulfilled orders with the Company without charge and receive a full refund of anything I have paid in connection with my participation in these selling arrangements.

- Additionally, I may return to the Company (at its Head Office) at the Company's expense within 21 days of such cancellation or termination any Products I have purchased in that period, including tickets for any forthcoming events and/or training days, and the Company will give me a full refund for them provided they are returned in the condition in which they were supplied to me (except their external wrappings (where applicable) may be broken).
- 16. If I terminate my distributorship after 14 days of entering into it, or if the Company terminates it, then (except to the extent set out in clauses 20, 21 and 22, which shall continue in force after termination) I shall have no further contractual obligations as a distributor to the Company and if I wish I may cancel any unfulfilled personal orders and immediately receive a full refund of any prepayment. I may also return to the Company (at the Company's expense) within 21 days of termination of my appointment any Products which I have purchased from the Company in the 12 months prior to such termination. If the Products are returned in the condition in which they were supplied (except their external packaging (where applicable) may be broken, the Company will give me a full refund on the return of the Products less a 10% handling charge (which will not be levied if the Company terminates the distributorship) and less, if the returned Products have deteriorated due to an act or default on my part, an amount equal to the diminution in their value resulting from such deterioration (which will not be levied if the Company terminates the distributorship).
- 17. The Company may terminate this Agreement and my appointment as a Forever Living Products' distributor at any time by giving me 14 days' written notice sent to my address set out on this Agreement. The period of notice of the termination shall start to run from the day when such notice is posted by first class post to such address.
- 18. The Company may terminate this Agreement forthwith if I break any term of this Agreement including terms set out in the CPH
- 19. If I cease to be a distributor I must immediately cease representing myself as a Company Distributor, collecting orders for Products or using the Company's name. I shall be entitled to retain any bonus, paid to me by the Company except bonus paid in respect of Products returned to the Company. I agree to repay the Company any bonus paid, including VAT where applicable, on returned Products if the Company has refunded any monies due to me and claims repayment of the bonus within I 20 days of when it was paid. I agree to repay, return or compensate the Company for any prizes or bonuses in the circumstances described in CPH 10.11.
- 20. I agree to use the Company's name and trade mark and the Product trade marks only for the purpose of my business as a distributor of the Company's Products and in accordance with the terms of this Agreement.
- 21. I agree that the names, addresses and contact details of the Company's distributors and any other information provided to me relating to my sponsored group are the Company's confidential proprietary information, and will only be used by me for the purposes of my business as a Forever Living Products' distributor.
- 22. If I attain the position of Manager, as described in the CPH, I agree that, whilst I am a Forever Living Products' Distributor and for six months after the termination of my appointment as a Company Distributor, I shall not encourage, persuade or recruit any person I know to be a Forever Living Products' distributor to market or sell the products of any other person, company or organisation.

PLEASE PRINT BLOCK CAPITALS	—	
AP	PLICANT'S DETAILS	
Applicant's Surname:	Applicant's First Name:	Date of Birth: Male/Female:
		/ / M/F
Spouse's Surname:	Spouse's First Name:	Date of Birth: Male/Female:
		/ / M/F
Address		Postcode:
Tel: Email Ad	dress:	
Bank Details: This information is available on your bank	statement Account Name:	VAT Registered: Yes/No
IBAN No.		
BIC No.		
health and beauty care products and such other products and service	ributor') and Forever Living Products Ireland Limited ('the Company'). T es as the Company may market from time to time ('Products').	, ,
HEREBY APPLY FOR APPOINTMENT AS AN INDEPENDENT DI	TRIBUTUR OF THE COMPANT. TUNDERSTAND THAT MIT APPOIN	HITEIN I VVILL DE EFFECTIVE

UPON THE COMPANY CONFIRMING MY APPOINTMENT. IN SIGNING THIS FORM, I UNDERSTAND AND AGREE THAT:

- 1. The terms of my appointment are set out below, on the reverse hereof and in the current edition of the booklet entitled 'Company Policy Handbook' (CPH). I have received a copy of these documents and acknowledge that they shall together form the entire agreement between me and the Company ('Agreement')
- If my appointment is confirmed by the Company I will be appointed as, and authorised to represent myself as, an independent Forever Living Products' distributor. I will then be entitled to purchase the Products for my business, and market the Products and if I attain the position of Assistant Supervisor, as described in the CPH, I will also be entitled to present the Company business opportunity in countries in which the Company operates. I will not be granted an exclusive franchise or any territorial exclusivity.
- In the conduct of my business as a Forever Living Products' distributor I agree to comply with the current CPH as amended from time to time by the Company. I agree that the Company has the right to change the CPH at any time on not less than 30 days' written notice and I agree to comply with the CPH as amended and that the terms of it form part of this Agreement. I understand that no amendment to the CPH will require me to incur any expenditure but it may require me to amend my business practices.
- 4. I agree also that the Company has the right to change the rates of bonuses and incentives paid by it and the events in respect of which they are paid at any time on not less than 30 days' written notice. Continued Overleaf...

Before you sign this form, make sure you have read it carefully, in particular the statutory warning below. Make sure you have received a copy of the Company Policy Handbook. It forms part of your Agreement.

Date:

STATUTORY WARNING

Applicant's Signature:

Pink Copy: Sponsor

- It is illegal for a promoter or a participant in a trading scheme to persuade anyone to make a payment by promising benefits from getting others to join the scheme.
- Do not be misled by claims that high earnings are easily achieved.
- IF YOU SIGN THIS AGREEMENT YOU HAVE 14 DAYS IN WHICH TO CANCEL AND GET YOUR MONEY BACK.

Spouse's Signature:		Date:	Bob Parker on behalf of the Company			
DETAILS	O F	FIRS	TORDER			
☐ New Distributor Pack £199.75	Personal Usaş	ge Product Pack £90.36	☐ Other (min. order £50)			
Delivery Address (If different from above)						
				i		



SPONSOR'S DETAILS

Full Name: Grace Carlisle

I.D. No: 353000124367 07812122014

Signature:

Grace Carlisle

Date:



Forever Living Products Ireland Ltd



Blue Copy: Distributor