



Product Order Form

Effective 25th of March 2013

fields marked with * are mandatory

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Distributor ID

(Do not fill in)

Applicants Information / Please fill out in block letters!

J O H N D O E

01	01	1990
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*Firstname, Surname / Company 's name

Date of birth

S A M P L E R O A D 1

*Street

1 2 3 4 5

L O N D O N

U K

*Zip code

*City

*Country

Shipping adress

12345-6789

12345-77777

*Phone #

Mobile #

J . D O E @ S A M P L E . C O . U K

E-Mail

VAT-number

Sponsor Information

E-Mail

SALES@ENAGIC-EUROPE.DE

Name ENAGIC EUROPE GMBH

ID 4000000

Phone # 21193657000

Register Applicant as [1] A

- LevelLuk SD501 EURO 2780 JR II EURO 1680
- LevelLuk SD501 Platinum EURO 3000 Anespa EURO 1680

Single Payment

Price

Supplies

VAT 19%

Shipping*

Total EURO

*Shipping EU without/with supplies: 34€/44€

Norway and Switzerland: 47€/57€

E-Payment

(E-Payment Form is required)

Price

Supplies

VAT 19%

Installment

Shipping

Total EURO

Down payment

3 / 6 / 10 / 16

*Payment method:

Credit Card

Wire Transfer

1 2 3 4 | 5 6 7 8 | 9 1 2 3 | 4 5 6 7

Credit Card No.

Visa

MC

Amex

CVV

123

Valid till

01

15

I certify that I have read, understand and agree to the Terms and Conditions set forth in the following documents which comprise the Contract, the Distributor Agreement, the Sales Contract, Policies and Procedures, Compensation Plan and the Products. I am of legal age in my state of residence. I agree that any false and misleading statement(s) may result in the termination or denial of registration as an Enagic Europe distributor. I understand that the financial reward will come from sales of products and not by recruiting people. I, the sponsor, have explained to the applicant all relevant information which the applicant should know prior to signing up. In addition, as a selling distributor, I acknowledge that I have a good faith duty to assist Enagic Europe in causing the customer to honor their payment obligation. At the very least, I agree to contact the customer in person or by telephone no less than three times to request that the customer make payments as required in the customer contract.

*Applicant's Signature

Date (TT/MM/JJ)

*Sponsor's Signature

Date (TT/MM/JJ)

Commerzbank
Name: Enagic Europe GmbH
KTO: 180321200 BLZ: 30040000
IBAN: DE64300400000180321200
SWIFT: COBADEFFXXX

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sales@enagiceu.com

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Ust-ID No. DE814980514
Commercial Register :
Amtsgericht Düsseldorf HRB 58900