UkonDD Application

September 2017



310 Sedake								
2TO ZERGVE	DISTRIBUTOR ID				FOR OFFICE USE ONLY			
Nago, Okinawa								
905-0013, Japan								
E-mail: <u>ukon@kangenfoods.com</u>		l agree to	receive	commur	nications	from Ena	agic via e	-mail

Phone: +81-98-951-0166 Fax: +81-98-917-0597

Okinawa Kangen Foods Co. Ltd.

and SMS

Applicant's Personal Information								
Applicant Name:	UkonDD Continue ID:	Repeat time(s)						
Date of Birth: / / (DD/MM/YYYY)	Driver's Licence/Passport No.:							
Address:								
E-mail:								
Bank Name:	Tel. No. (Home):							
Branch Name:								
Account Holder's Name:								
BSB:	Tel. No. (Mobile):							
Account Number:								
		Desister service A						
Sponsor Name:	Sponsor (Machine) ID:	Register as your A						

(If this is a renewal, please write 1A)

" $\sqrt{}$ "Please put a " $\sqrt{}$ " in the box

		Vegetarian Version							
	UKOI	UKON A (CAPSULES) UKON B (TEABAGS)				UKON C (SOAP)			
Standard Distributor Price JPY 76,000		JPY 76,000		JPY 76,000			JPY 76,000		
E8PA Cardholder Price		JPY 68,000	JPY 68,000			JPY 68,000			
Shipping Cost									
UKON A (CAPSULES) UKON B (TEABAGS)				GS)		UKO	N C (SOAP)		
JPY 2,75	JPY	PY 4,650			JPY 7,300				

Payment Method:

□ VISA □ MASTERCARD

Total Amount:

Please fill up if the shipping address is different from the residential address.

Recipient's Name:	Recipient's Tel. No.:	Postcode:		
Shipping Address (No P.O. Box):				

Terms and Conditions

- 1. Applicant is advised to enroll in the UkonDD program in order to receive UkonDD and Ukon∑ New commission from their downline.
- 2. Applicant is advised to purchase an E8PA membership to receive E8PA Cardholder price and associated member benefits.
- 3. Both the Application form and payment of a repeated purchase must be completed within the week before the Due Date.
- 4. Repeated buying of UkonDD three times (including the first purchase) will turn an UkonDD account permanent. Applicant can receive e-mail and SMS reminders when their subscription is due to renew however it is the Distributor's responsibility to renew on time.
- 5. After termination of an UkonDD account, or if an UkonDD account has not been renewed in the last 4 months, the Applicant is not qualified to receive commission for any UkonDD or Ukon∑ New sales from their downline.
- 6. If the Applicant stops renewing their UkonDD account and has not had a direct sale in the last 3 months, the Applicant's Special Point status will be cancelled.
- 7. Applicants who enroll as an UkonDD User are not entitled to receive any commission.
- 8. For any delivery failure caused by incorrect or incomplete shipping details, the Applicant is responsible to cover any additional shipping fees.
- 9. The recipient of an international shipment may be subject to such import fees, GST or VAT which are levied once a shipment reaches your country; additional charges for customs clearance must be borne by the recipient. Custom policies vary widely from country to country; you should contact your local customs office for further information. When customs clearance procedures are required, it can cause delays beyond our original delivery estimate.
- 10. Return Policy Okinawa Kangen Foods Co., Ltd. will replace or accept return if the products are damaged. The Applicant must return the product within seven (7) days of delivery. For any return after the 7-day period or if the product is used, we reserve the right to inquire the reasons for returning or exchanging the product, and the right to decline your request.

I certify that I have read, understood and agreed to the terms and conditions set forth in the following documents which comprise of the contract, Distributor agreement, sales contract, Policies and Procedures, compensation plan and products. I am of legal age in my country. I agree that any false and misleading statement(s) may result in the termination of my Distributorship. I understand that the financial reward will come from sales of products and not by recruiting people.

Applicant Signature:

Date:

Credit Card Payment Form

Please fill in <u>"Credit Card Holder"</u> information

Name										
Address										
City			State			Ро	stcode			
Tel. No. (Home)	()			Fax	()			
Tel. No. (Mobile)	()				·				
E-mail										
Product (Please Circle)		UKON A (Capsule	es)	UKO	ON B (Te	eabags)		UK	ON C	(Soap)

Credit Card Details

Cardholder's Name:	
MasterCard / Visa	
Expiry Date /	cvv
Total Amount: JPY	Cardholder's Signature

Please fill in if the delivery address is different from above

Name									
Address									
City				State				Postcode	
Tel. No. (Home)	()	-		Tel. No.	()	-	
					(Mobile)				

Purchaser's Name and Distributor ID if different from the Credit Card holder

Distributor ID: