



# New Body Products



APPLICANT		
1. Name:		5. Phone:
2. SSN:	3. Tax-ID:	6. Mobile:
4. Street Address:		7. Fax:
		8. E-mail:
SPONSOR		
9. Name (Last, First): <b>Ross, Valeria</b>		10. ID#: <b>352</b>

## MY AGREEMENT AS A NEW BODY DISTRIBUTOR

### DEFINITION OF DISTRIBUTOR

- As a Distributor of NEW BODY Products, I am an independent contractor and am not an employee or legal representative of NEW BODY. At no time will I imply that I am an officer, employee, agent or owner of NEW BODY Products. I cannot, nor will I attempt to, bind the Company in any manner or enter into any contract on behalf of the Company.
- I will purchase a \$50 NEW BODY Products (hereinafter called the Company) Distributor Sales Kit. I will also pay an application fee of \$10 and a yearly renewal fee of \$10.
- I understand and agree that I am responsible for all County, Municipal, State, and Federal Laws, rules and regulations of every nature in connection with holding, selling, advertising and distributing NEW BODY Products. NEW BODY has no responsibility to inform me of any such local requirements.
- I will build and maintain my own business at no expense to NEW BODY.
- The position of Distributor herein constitutes neither a franchise nor an exclusive distributorship.
- NEW BODY is not responsible for my tax liabilities due to earned income.
- I am 18 years of age or older.

### CONDUCTING BUSINESS

- I agree to use only official company literature and advertising; other sales promotions, newsletters, bulletins, websites, e-mail, or other literature that I may receive from time to time from the company will not be employed in any way in my re-sale of New Body Products unless and until written authorization to do so has been issued by the Company.
- I will not copy or duplicate (or allow to be copied or duplicated) any sales aids or other literature without prior written approval of the Company.
- I will make no claims of products benefits beyond that listed on labels or contained in Company approved material.

### TERMINATION OR TRANSFER OF DISTRIBUTORSHIP

- I may terminate this Agreement at anytime by giving written notice to NEW BODY.
- I cannot sell, assign or transfer my Distributorship without prior written approval from the Company. Such approval will not be unreasonably withheld.
- Any sales quotas do not bind me nor can NEW BODY terminate this agreement for lack of sales.
- I agree to adhere to the current NEW BODY Products Marketing Plan (as described in the Distributor Sales Kit) and any modifications that the Company finds necessary to make.
- I understand that NEW BODY may terminate a Distributor's Agreement for any Distributor who misrepresents the products or the image or purpose of the Company. NEW BODY may also terminate a Distributor's Agreement for Distributors who violate any of the rules or regulations herein.

NEW BODY maintains the right to revise, delete or add rules and regulations. Any changes of the above rules and regulations will become effective upon proper notification of all NEW BODY Distributors.

We accept Cashiers Checks, Money Orders, MasterCard or Visa. We do not accept personal or company checks.

PLEASE SIGN	
27. Signature of Applicant:	28. Date:
OFFICE USE ONLY	
Kit: <input type="checkbox"/> Ship <input type="checkbox"/> Walk-in <input type="checkbox"/> Other (Specify)	ID #: