



# Product Order Form

Effective 25th of March 2013

fields marked with \* are mandatory

\_\_\_\_\_

Distributor ID

Please send this completed order form to: paulsalemlink@me.com

(Do not fill in)

## Applicants Information / Please fill out in block letters!

\*Firstname Surname / Company 's name

Date of birth

\*Street

\*Zip code

\*City

\*Country

Shipping adress

\*Phone #

Mobile #

E-Mail

VAT-number

### Sponsor Information

E-Mail [info@KangenWater.Helpt.nl](mailto:info@KangenWater.Helpt.nl)

Name **JeePee | Joshua & Paul**

ID 4045195

Phone +32(0)87463963

Register Applicant as [ ] A [www.KangenWaterChangesYourLife.com](http://www.KangenWaterChangesYourLife.com) / [www.KangenWater.Helpt.nl](http://www.KangenWater.Helpt.nl)

- Leveluk SD501 EURO 2780
- Leveluk SD501 Platinum EURO 3000
- Leveluk R EURO 1180

- JR II EURO 1680
- 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

Credit Card No.     Visa     MC     Amex

CVV

Valid till

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, Polices 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

Enagic Europe GmbH  
 Immermannstr. 33  
 40210 Düsseldorf Germany  
 Tel +49-(0)211-936570-00  
 Fax +49-(0)211-936570-27

Tax-No: 133/5821/1603  
 Ust-ID No. DE814980514  
 Commercial Register :  
 Amtsgericht Düsseldorf HRB 58900

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