



DISTRIBUTOR APPLICATION

LIFEWAVE, INC. 9775 BUSINESSPARK AVE, SAN DIEGO, CA 92131 WWW.LIFEWAVE.COM

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Applicant Information

last name (please print) first		requested website URL www.lifewave.com/	distributor ID number (office use only)
phone number (daytime) fax number		business name (if different from applicant name)	date of birth (voluntary) mm / dd / yy
billing address		email address	language preference (english is default)
city state zip code county country		shipping address	
city state zip code county country		city state zip code county country	city state zip code county country
joint applicant last name first middle initial	phone number (if different than applicant's)	joint applicant's email address	

Sponsor Information

sponsor's distributor number	sponsor's last name first middle initial	phone number (daytime)
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Entity Certification

<p>Check appropriate box:</p> <p><input type="checkbox"/> Individual/Sole Proprietor</p> <p><input type="checkbox"/> Joint Applicants</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Corporation</p> <p><input type="checkbox"/> Other: _____</p>	<p>Under penalty of perjury, I/we certify that:</p> <p>1. The information supplied herein is correct;</p> <p>2. I am not subject to backup withholding income because</p> <p>(a) I am exempt from backup withholding</p> <p>*(b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of failure to report All interest or dividends, or</p> <p>(c) the IRS has notified me that I am no longer subject to backup withholding; and</p> <p>3. I am a U.S. Person (including a U.S. resident alien)</p> <p><small>* Certification instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to withholding.</small></p>
social security number OR EIN number (employer ID number)	applicant's signature date
X	X

Terms and Conditions

<p>I have read and agree to the Terms and Conditions on the LifeWave website and I am familiar with the return policy described in LifeWave, Inc. Policies and Procedures. I hereby agree to be bound by the Terms and Conditions, which by reference are fully incorporated on the LifeWave, Inc. website. I certify that I am the age of majority and am legally able to enter into this contract. I have read and agree to LifeWave, Inc. Policies and Procedures and agree to the terms of confidentiality contained therein.</p>			
applicant's signature	date	co-applicant's signature	date
X		X	

***To place an order or enroll in autoship, login to your website or contact LifeWave Customer Support at: 1-866-202-0065.**

A PARTICIPANT IN THE LIFEWAVE, INC. COMPENSATION PLAN HAS THE RIGHT TO CANCEL AT ANY TIME, FOR ANY REASON. CANCELLATION MUST BE SUBMITTED IN WRITING TO THE COMPANY'S CUSTOMER SERVICE OR MAIL TO LIFEWAVE, INC.