



ENAGIC® (MALAYSIA) SDN BHD
 Registration No.: 201101042983
 Direct Sales License No.: AJL931978

Unit 25-6 & 27-6, The Boulevard, Mid Valley City, Lingkaran Syed Putra, 59200, Kuala Lumpur
 Tel: (+60)3-2282 2332 Fax: (+60)3- 2282 2335

ALL APPLICATION MUST BE SUBMITTED TO

goc.mys@enagic.com

CC to ukon@enagic-my.com

www.enagic-my.com

UKON™ APPLICATION FORM

TYPE OF ORDER	
<input type="checkbox"/> NEW	<input type="checkbox"/> REPEAT

<input type="checkbox"/> USER	
<input type="checkbox"/> DISTRIBUTOR	NRIC & MEMBER FEE: MYR 50.00 **STARTER KIT INCLUDED**
ID NUMBER	

FOR OFFICE USE ONLY	RECEIVED BY:	APPLICATION DATE:
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A. PRINCIPAL INFORMATION.

*Applicant's Name:			
*NRIC or Company No:		*Date of Birth:	
*Address:			
*Postal Code:		*City:	
Phone No (Home/Office):		*(Mobile):	
Email Address:		*Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female

B. PRINCIPAL BANK INFORMATION. *FILL OUT IF APPLICANT REGISTER AS DISTRIBUTOR

Account Holder Name:			
Name of the Bank:			
Account No.:			
NRIC No.:		Old NRIC:	
Company Registration No.:			
Income Tax No.:			

C. SPONSOR'S INFORMATION.

Sponsor's Name:			
Sponsor's ID No:		Sponsor's Contact No:	
Register the Applicant as your:	() A		

D. PRODUCTS. **All prices are zero-rated of GST**

CATEGORY	CONTAINS OF		FISH SOURCE	PRICE
<input type="checkbox"/> UKON DD	10 BOXES	1000 CAPSULES	SQUALENE	MYR 3,180.00
<input type="checkbox"/> UKON SIGMA	30 BOXES	3000 CAPSULES	SQUALENE	MYR 8,270.00

E. SHIPPING DETAILS. **All prices are zero-rated of GST**

AREA & COURIER	UKON DD	UKON SIGMA
<input type="checkbox"/> PENINSULAR MALAYSIA	MYR 27.00	MYR 27.00
<input type="checkbox"/> EAST MALAYSIA	MYR 50.00	MYR 87.00

F. UKON™ TO BE DELIVERED TO:

Recipient:			
Address:			
Postal Code:		City:	
Contact No.:			

G. PAYMENT METHODS. – SINGLE PAYMENT ONLY

<input type="checkbox"/> CREDIT CARD	Swipe in the office	<input type="checkbox"/> Visa <input type="checkbox"/> Master
<input type="checkbox"/> CHEQUE/ REMITTANCE	PBB: 3-1777-8621-4	HLB: 223-00000-162

H. PAYMENT METHODS. – SINGLE PAYMENT & INSTALLMENT PLAN					
<input type="checkbox"/> MOTO <i>*Commission may be varied from cheque/ remittance/ credit card swipe in the office. Please refer commission chart.</i>	Mail Order	<input type="checkbox"/> Visa <input type="checkbox"/> Master		Amount:	
	Credit Card Number:				
	Credit Card Expiry Date	(MM/YY)			
	Cardholder's Signature:			<input type="checkbox"/> Public: 12/24 months <input type="checkbox"/> CIMB: 12/24 months <input type="checkbox"/> UOB: 12/24 months <input type="checkbox"/> HLB: 12/24 months	
The installment scheme is applicable for UKON SIGMA only					
I. TERMS AND CONDITIONS.					
Physically swipe in Enagic® Kuala Lumpur Office					
MONTHS & BANKS	PUBLIC, HONG LEONG	CIMB, HSBC RHB & AFFIN	UOB	OCBC	STANDARD CHARTERED,
12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
The installment scheme is applicable for UKON SIGMA only					
J. TERMS AND CONDITIONS.					
1. Copy of credit card (front side only) must be submitted for MOTO payment method.					
2. A minimum Penalty Fee of RM159 per case onto the request for Cancellation and Amendment for each transaction					
K. TOTAL PAYMENT.					
All prices are zero-rated of GST					
UNIT PRICE	MYR				
SHIPPING FEE	MYR				
MEMBER FEE	MYR				
TOTAL	MYR				
L. ALTERNATE PAYER SECTION (if required).					
The Payer (Name) _____ bearing the NRIC/Passport No. _____ paying total of MYR _____ for The Applicant (Name) _____ ALTERNATE PAYER'S SIGNATURE: _____					
M. TERMS & CONDITIONS.					
<p><i>In order for a non-UKON™ DD distributor to receive any UKON™ DD commission & sale, he/she is required to enroll him/herself with UKON™ DD Program by purchasing a UKON™ product. Otherwise, all the commission and sale for UKON™ DD will pass to the uplines.</i></p> <p><i>A UKON™ DD distributor is required to REPEAT THE PURCHASED AT LEAST TWICE in order to make the UKON™ DD account as permanent account. Otherwise, the UKON™ DD account will be terminated without any notice upon expiry date. By default, Distributor shall no longer entitle to receive any commission for any UKON™ DD sale(s).</i></p>					
N. AGREEMENTS.					
<p><i>I certify that I have received a copy of and have read and understood the provisions of Enagic® (Malaysia) Sdn Bhd's Set of Policies; Distributor Policies & Procedures, Privacy Policy, Refund Policy, Collection Policy, Commission Policy and Delivery Policy which is published on Enagic® (Malaysia) Sdn Bhd's website; www.enagic-my.com. I hereby agree to be bound by Enagic® (Malaysia) Sdn Bhd's Set of Policies (including any amendments thereto which shall be furnished to me from time to time).</i></p> <p><i>I confirm that I am of full legal age and all my personal information and data ("Personal Data") stated above are complete and accurate. I hereby acknowledge that my personal information may be shared with Enagic® (Malaysia) Sdn Bhd's related and/or affiliated company within Malaysia or outside Malaysia for the purposes of performing this agreement.</i></p> <p><i>Furthermore, I hereby agree that my personal data shall be processed, stored, used and disclosed in accordance with the Enagic® (Malaysia) Sdn Bhd's Privacy Policy.</i></p>					
<input type="checkbox"/> Agree			<input type="checkbox"/> Disagree		
<p><i>I am aware that Enagic® (Malaysia) Sdn Bhd has the right to reject any application whereby is incomplete and/or falsification of signature and/or initial has occurred during the submission of this product application form.</i></p> <p><i>I hereby further acknowledge that I understand my ten (10) working days right of cancellation during the ten (10) working days cooling off period and</i></p> <p><input type="checkbox"/> <i>I hereby request Enagic® (Malaysia) Sdn Bhd to release/deliver the product before the expiry of the cooling off period and by doing so, I hereby waive my rights to cancel the contract during the ten (10) working days cooling off period.</i></p> <p><input type="checkbox"/> <i>I wish to maintain my rights to be able to cancel the contract during the ten (10) working days cooling off period. **The Applicant is required to fill up 'Kontrak Jualan Langsung/Pesanan Pelanggan' (Direct Sales Contract/Customer Order). **</i></p>					
APPLICANT'S SIGNATURE: DATE:			SPONSOR'S SIGNATURE: DATE:		