

# Quick Application

## Info for On-line Enrollment

Today's Date \_\_\_\_\_

Sponsor Name \_\_\_\_\_ ID # \_\_\_\_\_

Placement Name \_\_\_\_\_ ID # \_\_\_\_\_

New Distributors ID# \_\_\_\_\_

Name \_\_\_\_\_ Birthday: \_\_\_/\_\_\_/\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

SSN \_\_\_\_\_ Email \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Shipping Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\_\_\_ Visa \_\_\_ MasterCard \_\_\_ Discover \_\_\_ AMEX

Name on Card \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

The \$35 Membership allows you to purchase the wholesale price(s):  
Please list your initial order and monthly automatic delivery program (ADP) from the Product Sheet

### Initial Order:

Quantity	Item	Price
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Total:

### ADP Order:

Quantity	Item	Price
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Total:

Your official application will come with your first order. Fill it out immediately, sign it and fax or mail it to the company.

You may stop or change your monthly delivery at anytime by contacting Xango directly 1-877-Go-Xango