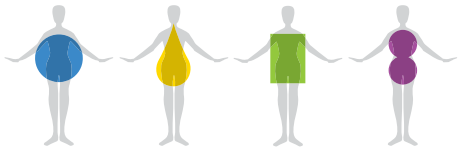
Shapes™
Your Body. Your Style.

New Recruit Application



Recruiter CODE	
Recruiter NAME	
DATE	

Office Use Only	
	Processed Date:
	Processed By:
	Shipping Date:

New Recruit

Name: _____

Address: _____

City: _____ Province: _____ PC: _____ Telephone Home: _____

Telephone Work: _____ Cell : _____ Fax: _____

Email: _____

Shipping Address for Starter Kit ☐ SAME AS ABOVE

Name: _____

Address: _____

City: _____ Province: _____ PC: _____

☑ YES. I would like to become a Shapes Consultant.

☐ Please send my Starter Kit for $199.00 plus taxes, shipping & handling for a total cost of $_____

Signed: _____ Date: _____

Method of Payment ☐ Cheque (made payable to The Right Shape Inc.)

☐ Credit Card ☐ VISA ☐ MasterCard

CREDIT CARD NUMBER _____ EXPIRY DATE MONTH _____ YEAR _____

Cardholder Name: (Please Print) _____ Signature _____

Processing starts when Head Office receives payment. You will receive your (at cost) Start-up Kit in 10 business days.

Consultants may return the (at cost) Start-up Kit which they have purchased at any time from the Company within the previous 30 day period. The (at cost) Start-up Kit must be in resalable condition and will be repurchased at 90% of the Consultant's original purchase price.

I have carefully read and agree to comply with Company's Policies and Procedures, Company's Compensation Plan, this New Recruit Application and associated terms of the Consultant Agreement.

I may be required from time to time to provide Company with information relating to my sales activities. I hereby authorize and consent to the collection, use and disclosure of personal information about me relating to such activities.

Welcome to The Right Shape Inc./Shapes family.