

Online Product Order and Distributorship Application

From (Name & Address)

To

Noni Family Wellness Movement
(A unit of Noni BioTech Pvt. Ltd.)
12, Rajiv Gandhi Road
Perungudi
Chennai - 600 096
India.

Dear Sirs,

I apply for Distributorship in the Noni Family Wellness Movement. I wish to order for Noni Family Business Tool Pack with Divine Noni Gold Pack - 400ml 800ml. My personal details are as follows.

Applicant Name :

Telephone (R) :

Telephone (O) :

Mobile :

E-mail :

Distributor ID :

Distributorship Details

Noni User Name :	Noniology ID :	Sponsor's Noni User Name :
		Selected Team :

I am enclosing the following DD for Rs. 4645 towards the purchase of the above.

DD No. :

Bank drawn :

DD Date :

favouring payable at (If you are purchasing from the nearest DSP in your area, pay by Cash or Demand Draft in the name of the DSP.)

1. I have read, understood and agreed to the terms and conditions of Noni Family Business Agreement [[Click Here for Agreement](#)].
2. I understand that my participation in Noni Family Business home based Retail Marketing programme is out of my free choice.
3. I understand that the purchase of Product Package by me does not in anyway guarantee any commission income. Only by myself participating in the Noni Family Business marketing plan and creating sales volume by recommending and retailing the Noni product package will generate commission income.

The information provided above are correct

Date :

Place :

Signature of the Applicant

Note :

1. Please send this page along the Demand Draft and Page 10 duly completed to our office or to the nearest distributor stock point mentioning your Noni User Name and Noniology-ID on the reverse of the Demand Draft.
2. Please take copy of this page for your record.