|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Victory Nutrition International Registration Form** | | | | | | | | |
| **Sponsor's Name:** | | **Representative ID#** | **Sponsor's Phone:** | | **Sponsor's Email:** | | | |
| **Applicant's Name:** | | | **Company Name:** | | | | | |
| **Address:** | | | | | | | | |
| **City, State/Province, ZIP/Postal Code:** | | | **Email:** | | | | | |
| **Phone:** | | | **SSN/SIN/EIN/Tax ID:** | | | | | |
| **Website URL you prefer:** | |  | **Backoffice** | | **Password:** |  |  |  |
|  | |  |  | |  |  |  |  |
| **(ex: vni.life/johndoe)** | |  | **User Name:** | | **(min 8 char)** |  |  |  |
| **Product** | | | | | **Qty** | **Mo**  **Subscip** | **Price** | **Total** |
| **Prodovite®** Vitamin-Mineral Phytonutrient Complex (30 servings) | | | | |  |  | **65.00** |  |
| **Brain Reward™** with Prodosome Encapsulation Technology (180 count) | | | | |  |  | **75.00** |  |
| **N-Sorb™ The Diet Essential** (30 servings) | | | | |  |  | **65.00** |  |
| **ThionExtra™** (120 count) | | | | |  |  | **75.00** |  |
| **Prodovite Concentrate®** (3-3 oz bottles - 30 servings) | | | | |  |  | **65.00** |  |
| **Prodovite Moments®** Vitamin-Mineral Phytonutrient Complex (16 servings) | | | | |  |  | **50.00** |  |
| **Brain Reward™** with Prodosome Encapsulation Technology (15 serving display box) | | | | |  |  | **42.00** |  |
| **N-Sorb™ The Diet Essential** (15 servings) | | | | |  |  | **35.00** |  |
| **Share & Grow Pack** (1 time purchase/new Partners only eligible to buy within month of sign up and 2 following months) - 2 Prodovite (30 oz), 1 Brain Reward (180 ct), 2 N-Sorb (30 ct), 1 N-Sorb (15 ct), 2 Brain Reward (15 ct boxes), 3 Prodovite Moments (16/box) FREE: 4-pack Moments, 10 servings N-Sorb, 1 pack VNI Booklets, FREE  SHIPPING | | | | |  | N/A | **574.00** |  |
| **Promoter Pack** (1 time purchase/new Partners only eligible to buy within month of sign up and 2 following months) -  1 Prodovite (30 oz), 3 N-Sorb (30 ct), 1 Brain Reward (15 ct box), 2 Prodovite Moments (16/box) FREE: 4-pack Moments, 1 pack VNI Booklets, FREE SHIPPING | | | | |  | N/A | **390.00** |  |
| **Basic Pack** (1 time purchase/new Partners only eligible to buy within month of sign up and 2 following months) - 1  Prodovite (30 oz), 2 N-Sorb (30 ct), 1 Brain Reward (180 ct), 2 Prodovite Moments (16/box) FREE: 5 N-Sorb samples, FREE SHIPPING | | | | |  | N/A | **262.00** |  |
| **Call 215-256-1486 or 866-881-1624 for Sales Tax & Shipping & Handling Charges\*** | | | | | | | Subtotal |  |
| Sales Tax |  |
| Shipping |  |
| **Total** |  |
|  | | | | | | | | |
| **Electronic checking (bank draft form required) If no form, complete the section below. Excludes Canada** | | | | | | | | |
| **Name of Bank Account Holder (same as name on the check)** | | | | | | | | |
| **Bank Account #:** | | | **Bank Routing #:** | | | | | |
| **Please send a voided check:** | | | | | | | | |
| **Credit Card Information** | **Visa MasterCard** | | **Discover** | **American Express** | |  | |  |
| **Name on Card:** | | **Number:** | | | | | **Sec Code:** | **Exp. Date:** |
| **Credit Card Billing Address:** | **Same as above** | | **Shipping Address:** | **Same as above** | |  | |  |
| **Name:** | | | **Name:** | | | | | |
| **Address:** | | | **Address:** | | | | | |
| **City, State/Province, ZIP/Postal Code:** | | | **City, State/Province, ZIP/Postal Code:** | | | | | |
| **Payment Authorization and Signature**  Yes! I am electing to be a Victory Nutrition Customer or Representatives. I authorize VNI to charge my bank account identified above for my orders. I authorize VNI to debit my account for the amount of my order. I understand that shipping, handling and applicable taxes will also be added to all orders. I have read and agree to the Terms and Conditions as issued by VNI and agree to abide by them.\* I certify that all information provided on this Authorization is true and correct and that I am the same person as the name on the bank account.  Signature: Date: | | | | | | | | |
| If you prefer to mail in your payment, contact Customer Care at 866-881-1624 or 215-256-1486. Fax Orders to 215-689-4135. \*Please contact Customer Service for Warehouse Pick Up. | | | | | | | | |

vni.life/

