

Business Entity Form – EMEA (4)

Nu Skin International Inc. One Nu Skin Plaza, 75 West Center Street, Provo, UTAH, 84601, U.S.A

DIRECTIONS

- 1/** Complete this form to supplement your application for an independent Brand Affiliate Account if operating as Business Entity.
- 2/** Send this form by email to your local customer service (contact details available at http://www.nuskin.com/eu/contact_bulk.html).

The meaning of capitalized terms not found in this form is set forth in the Policies & Procedures.

PLEASE TYPE OR PRINT CLEARLY USING DARK INK

Company Information:	Bank account information:
Name of Business Entity (to appear on all correspondence) <input style="width: 100%; height: 30px;" type="text"/>	Bank account holder (name of the company):
Nu Skin ID Number ¹ : <input style="width: 150px; height: 20px;" type="text"/>	Financial Institution:
Company seat:	Sort Code:
Country/City:	IBAN ² :
ZIP Code:	BIC/SWIFT-Code:
Company Registration Number:	Account number:
VAT Number:	
Represented by:	
Nu Skin Sponsor(last name, name):	
Sponsor Nu Skin ID Number #:	

¹ Provided by NS Office.

² For commission payments only. The bank account number must belong to the Business Entity.

List the Primary Participant of the Brand Affiliate Account and all other individuals who have an interest in the Business Entity (e.g. member, partner, director, officer, shareholder, or other position). All signatures below affirm that each of the signing parties is an individual with an interest or position in this Business Entity, who has read and accepted all of the terms and conditions detailed in the Contract, and that the Business Entity and each individual will comply with the terms and conditions of the Contract. THE PRIMARY PARTICIPANT IS AN AUTHORIZED AGENT OF THE BUSINESS ENTITY AND BRAND AFFILIATE ACCOUNT AND HAS BEEN FORMALLY AUTHORIZED TO SIGN AND EXECUTE CONTRACTS ON ITS BEHALF, AND NU SKIN MAY RELY AND ACT ON ANY INFORMATION PROVIDED BY THE PRIMARY PARTICIPANT.

Name of Primary Participant ³ (Last, First, Middle)	Title	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature		
<input type="text"/>		

Participant name	Title	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature		
<input type="text"/>		

Participant name	Title	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature		
<input type="text"/>		

Participant name	Title	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature		
<input type="text"/>		

All future changes to this Business Entity must be submitted in writing and must include the names and signatures of all original parties. The Company reserves the right to accept or reject any application to become an independent Brand Affiliate.

³ Only the Primary Participant is allowed to submit this form.
Last Update: January 2019