

# PRODUCT ORDER/CREDIT CARD AUTHORIZATION FORM

In accordance with Nu Skin's Policies and Procedures Chapter 2, Sections 3.7 and 3.9, Distributors are prohibited from submitting product orders in the name of another individual without the individual's prior written approval. Likewise, Distributors may not use another individual's credit card to order products or the company's business support materials and services without the individual's prior written approval.

This completed Authorization Form must be kept in the files of the Distributor receiving authorization, and provided to Nu Skin International, Inc. and/or any of its affiliated offices ("Nu Skin") upon request.

#### Account and/or Credit Card Owner:

NAME:

DISTRIBUTOR / PREFERRED CUSTOMER ID:

#### Please check all that apply:

- o I authorize the use of my Nu Skin account by the Distributor listed below.
- o I authorize the use of my credit card for Nu Skin orders by the Distributor listed below.

### DISTRIBUTOR NAME: \_\_\_\_\_

DISTRIBUTOR ID:

NAME AS IT APPEARS ON CREDIT CARD:

CARD TYPE (e.g., VISA, Master Card, etc.):

# CREDIT CARD NUMBER:

EXPIRATION DATE: (mm /yyyy) \_\_\_\_\_

FOUR DIGIT CID AMERICAN EXPRESS: \_\_\_\_\_

THREE DIGIT CV CODE OTHERS: \_\_\_\_\_

MAXIMUM TOTAL CHARGE AMOUNT: US\$ \_\_\_\_\_

I consent and agree to Nu Skin's collection, use and disclosure of the personal information in accordance with Nu Skin's Policies and Procedures Chapter 1, Sections 2.1 and 2.2, and Nu Skin's Web Site Privacy Policy Privacy Policy at <a href="http://www.nuskin.com/en\_US/corporate/legal.html">http://www.nuskin.com/en\_US/corporate/legal.html</a>.

## AUTHORIZATION SIGNATURE: \_\_\_\_\_

DATE (MM/DD/YYYY):