



Sunway Biotech Distributor Application Form
美商生威国际經銷商加入申請表

For New Applicant (新申請者):

First Name (第一個名字):	Middle Name (中間的名字):	Last Name (姓):	SSN No.# (社會安全號/身份證號碼):
Mailing Address (通訊地址):	Apartment or Street No. (公寓/街道號碼):	Street Name (街道名稱):	City (城市名稱):
State (州/省):	Zip Code (郵政編碼):	Country (國家/地區):	
Shipping Address: (If Different) (收貨地址, 如果與上不同, 不能使用郵政信箱) No P.O. Box Available	Apartment or Street No. (公寓/街道號碼):	Street Name (街道名稱):	City (城市名稱):
State (州/省):	Zip Code (郵政編碼):	Country (國家/地區):	Full Name (If Different) (收貨人全名, 如果與上不同):
Home Phone No. (家庭電話):	Mobile Phone No. (移動電話):	Fax No. (傳真號碼):	E-mail (電子信箱):
Shipping Type (郵寄類型)	Over night <input type="checkbox"/>	UPS Ground <input type="checkbox"/>	International <input type="checkbox"/>
Sunway Business Information (申請生維國際商務資料)	VIP--- \$Any Product+SH+Tax <input type="checkbox"/>	100BV--- *\$54.99+**\$140.00+SH+Tax <input type="checkbox"/>	300BV--- *\$54.99+**\$420.00+SH+Tax <input type="checkbox"/>
	600BV--- *\$54.99+**\$840.00+SH+Tax <input type="checkbox"/>	1200BV--- *\$54.99+**\$1680.00+SH+Tax <input type="checkbox"/>	
Personal Sunway Website (個人生維網站後綴名稱)	www.mysunway.com/ _____		
Sponsor Information (推薦人資料)	Full Name (全名):	Distributor ID (生維經銷商 ID):	Phone No.:(聯係電話):
Payment Information (付款資料, 請聯係生維國際) Please contact Sunway	Credit Card (信用卡) <input type="checkbox"/>	Money Order <input type="checkbox"/>	Cashiers Check (信用本票) <input type="checkbox"/>
	Cash Card (國際現金卡) <input type="checkbox"/>	Personal Check (個人支票) <input type="checkbox"/>	Business Check (公司支票) <input type="checkbox"/>
Taxpayer Information (納稅人信息)			
Social Security No. (社會安全號/身份證號):	First Name (第一個名字):	Middle Name (中間的名字):	Last Name (姓):

● Annotation (註解):

* Personal Online Office Management Annual Fee—Start Kit(美商生威國際經銷商個人網上辦公中心年費);

** Business Start Packages (美商生威國際經銷商啓動訂單).

The information above is my true and correct name and Taxpayer ID/Social Security Number (以上是我本人真實的和正確的姓名、納稅人資料、社會安全號碼/身份證號碼). Any incorrect or misleading information regarding this application is my full



Sunway Biotech iINTERNATIONAL, LLC.

responsibility (對於在這個申請表中的任何不正確的或令人誤解的資料，申請人本人負全部的責任). You (您), the buyer (購買者), may cancel this transaction at any time prior to midnight of the third business day after the date of the transaction (在美商生威國際得到了您提交的此申請后的三個工作日午夜前的任何時候都可以取消這個申請). Please refer to the companies Policies and Procedures online (請仔細閱讀在美商生威國際網站上的相關政策與規定). I acknowledge that I have read, understand and agree to the terms set forth in the company's Policies and Procedures which are posted online at www.Sunwaybiotech.com. (我已經仔細閱讀了, 明白並同意接受美商生威國際有限公司的政策與規定。)

I certify under penalty of perjury that the foregoing is true and correct .(我起誓，我如果以上的所提供的資料有不真實的和錯誤的，我願意接受相應的處罰。)

Signature of Application (申請者簽字):

Date (申請日期)---mm/dd/yyyy (月/日/年):

For Sunway Office Use Only (以下部分為美商生威國際工作人員使用):

Accepted Date _____ **Transact By:** _____ **Manager:** _____

e-mail: info@sunwaybiotech.com

Tel: 909-363-1618

Fax: 909-363-1616