



NEW ENROLLEE CHANGE FORM

Section 1: To be Completed by Enroller Requesting for Enrollee Change

Up to two months following the month of enrollment, an enroller can move a personal enrollee within their business organization. In order to request a move, please complete this form and return it to Melaleuca Southeast Asia (Singapore) Pte Ltd.

Person initiating change _____ / _____
Enroller Customer ID

Please move _____ / _____
Customer/ Marketing Executive Date of Enrollment Customer ID

To be directly under _____ / _____
Customer/ Marketing Executive Customer ID

Note: The date of enrollment is the date of receipt of the Customer Membership Agreement.

I, _____ / _____ would like to pay for this change by:
Enroller Requesting Change Customer ID

Visa

MasterCard

Interbank GIRO

I, the undersigned, requested the above change. I understand that every business or customer below the Customer or Marketing Executive being moved will also be moved, unless it moves a Customer or Marketing Executive out of their Enroller's organization and any organization that does not move will roll-up according to Melaleuca's Roll-up policy. I further understand that any requested move is limited to 20 businesses/customers moving within my organization in one move or a series of moves submitted together. If the requested move or series of moves involves more than 20 businesses/customers it will not be approved. An enroller can move a personal enrollee to a different position within the month of enrolment by submitting a new amended Customer Membership Agreement.

I, understand as per the Melaleuca Statement of Policies, Melaleuca reserves the right to accept and approve the requested change. Melaleuca must have original signatures and no verbal authorization will be accepted. No faxes or photocopies will be accepted. Please allow a minimum of 30 days for review of this request. All approved changes will be processed from the 15th – 25th of each month. Melaleuca accepts NO responsibility whatsoever for the commissions pursuant to the processing of these changes.

There will be a S\$15.00 fee for each Customer or Marketing Executive moved in the organization.

Signature of Enroller Date

Section 2: For Official Use

Received by: _____
Date Received

Reviewed by: _____
Date Reviewed

Chargeable fee: S\$ _____

Processed by: _____
Date Processed

APPROVED/ NOT APPROVED delete w here applicable*