

DESCRIPTION	UNIT PRICE VAT INCL.	QUANTITY PRODUCTS SELECTION	PRICE VAT INCL.
Starter kit (mandatory) 1 product of your choice, Guides «company» «opportunity» «go» personalized website & back-office. Please select between SEUltra, Cyactiv and PlasmaFlo.	69€	1	69€
ADDITIONAL PRODUCTS PACK ADDED WITH YOUR STARTER KIT (ONLY AVAILABLE WITH THE PURCHASE OF YOUR STARTER KIT, 1 OPTION POSSIBLE)			
Mini Fast Start Pack 2 products (of your choice)	110€		
Fast Start Pack 5 products (of your choice)	260€		
BROCHURES & PACK OF ADDITIONAL PRODUCTS			
Pack of 20 products (of your choice)	999€		
Pack of 65 products (of your choice)	2999€		
Cyactiv - Pack of 10 brochures	2,50€		
PlasmaFlo - Pack of 10 brochures	2,50€		
StemEnhance Ultra - Pack of 10 brochures	2,50€		
Sport - Pack of 10 brochures	5€		
Shipping fees are offered for the order of Starter Kit and any additional pack.		Total VAT incl.	

YOUR PERSONAL INFORMATION (MANDATORY)	
Last name:	First name:
Address:	
ZIP code:	City:
Country:	Phone (required):
Email (required):	
Birthplace:	Birthdate:
Passport or ID card N°:	
Family situation:	Maiden name:
Username:	Password:
Website: _____ .cerule.com	
Name - Surname of the co-applicant:	
Co-applicant passport or ID card N°:	
YOUR DISTRIBUTOR OR COMPANY INFORMATION (MANDATORY)	
Your chosen status for the activity (check the option): <input type="checkbox"/> Distributor <input type="checkbox"/> Company	
Name of your company:	VAT number:
YOUR BANKING INFORMATION (MANDATORY)	
Name of your bank:	Complete address:
IBAN:	BIC:
INFORMATION OF YOUR ENROLLER (MANDATORY)	
ID number of your enroller:	
Last name:	First name:

AUTOSHIP:

Setup your new autoship that will be in place from the 1st of July. Your autoship gives you the possibility to receive each month your products on time and to ensure you have enough personal volume points required for your qualification in the pay plan.

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StemEnhance Ultra	55€		
PlasmaFlo	55€		
Cyactiv	55€		
Wellness pack (1SEU 1PF 1CY)	155€		
Sport pack (2SEU 2PF 1CY)	250€		
Shipping fees	7€		
Total VAT incl.			

I would like to setup an autoship. Date of your next autoship:
Next autoship for / / 20__

I allow Cerule to charge on my credit card saved on file the amount of my autoship every month.
From / / 20__

PAYMENT METHOD:

1st Option: By wire transfer

2nd Option: By credit Card

Account name: SAS CERULE FRANCE
Bank Name: Banque Populaire
IBAN: FR76 1470 7016 0131 8210 4120 482
BIC: CCBPFRPPMTZ

By credit card : Mastercard Visa
Cardholder name:
Card numbers:
Expiration date:
CVV:

I allow Cerule to send me information by email, text messages or social media.

The boxes below are mandatory. If they aren't read and ticked your form won't be taken into account.
Terms & Conditions & Policies & Procedures are available on www.cerule.com

I allow Cerule to save my credit card information on my file for the next autoship orders.

I accept the terms and conditions of the Cerule distributor agreement.

I accept the policies & procedures from the company Cerule.

Date:

Signature:

Co-applicant signature: