

Business Partner Application



\$899 Kyani Professional Pack
QV 750 - CV 380 - KV 380- SV 100

- (2) Sunrise Packets
- (2) Sunset
- (2) 15ml Nitro FX™ 8 Pack
- (2) 15ml Nitro Xtreme™ 8 Pack
- (1) HL5 (1) Fit20
- (1) ON - Peach Mango
- (1) ON - Raspberry Grapefruit
- (1) 10 Pack Sunrise Samplers
- (1) Core 140+ Chocolate
- (1) 3 Months Kyani PRO
- (1) 12 Months Digital Suite



\$599 Kyani Builder Pack
QV 500 - CV 180 - KV 180- SV 100

- (1) Sunrise Packets
- (1) Sunset
- (1) 15ml Nitro FX™ 8 Pack
- (1) 15ml Nitro Xtreme™ 8 Pack
- (1) HL5 (1) Fit20
- (1) 10 Pack Sunrise Samplers
- (1) Core 140+ Chocolate
- (1) 3 Months Kyani PRO
- (1) 12 Months Digital Suite

OPTIONAL AUTOSHIP

YES! I want to enjoy the convenience and savings of Kyani's Monthly Autoship Program.

Kyani will automatically ship your monthly order and your credit card will be charged. Your product will ship automatically on the date indicated to the right.

Autoship Date

(Available 1-25th) _____

\$218.95 Triangle Couples
QV 150- CV 90- KV 90

- (2) Sunrise™ Packets
- (2) 90 ct Sunset™
- (2) 56 ml Nitro Xtreme™

\$121.95 Triangle Xtreme
QV 75- CV 50- KV 50

- (1) Sunrise™ Packets
- (1) 90 ct Sunset™
- (1) 56 ml Nitro Xtreme™

\$192.95 Triangle X +HL5
QV 125 - CV 80 - KV 80

- (1) Sunrise™ Packets
- (1) 90 ct Sunset™
- (1) 56 ml Nitro Xtreme™
- (1) HL5 30 Pack

\$305.95 Weight Management
QV 100 - CV 80 - KV 80

- (1) Sunrise™ Packets
- (1) 90 ct Sunset™
- (1) 56 ml Nitro FX™
- (4) Core140+

APPLICANT INFORMATION

Name (First, M.I., Last)

Company

Date of Birth (MM/DD/YY)

Social Security #

Tax ID#

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Home Phone

Cell Phone

Fax

Email address

Shipping Address (Street)

City

State

Zip Code

Extension Name for Replicated Site (**yournamehere**.kyani.com)

PAYMENT INFORMATION

- Visa
- Discover
- Mastercard

Card Number

Security Code (CVV)

Exp. Date (MM/YY)

Card Holder Name (as it appears on card)

Card Holder Billing Address (where you receive your monthly statement)

City

State

Zip Code

GENEALOGY INFORMATION

Sponsor Full Name (First, M.I., Last)

Sponsor Company

Sponsor Distributor ID#

Placement Full Name (First, M.I., Last)

Placement Company

Placement Distributor ID#

This application is subject to approval by Kyani, Inc. and is not binding until the application is approved by the company. If approved, Applicant agrees to be bound by all terms and conditions of the Kyani Distributor Agreement and the company Policies and Procedures as currently in effect or amended from time to time. Applicant may cancel this application within a period of three days from the date hereof by sending written notification of the withdrawal to the company at 1070 Riverwalk Dr. Ste 350, Idaho Falls, ID 83402; by fax to 1-208-529-9873, or by email to cs.usa@kyanicorp.com. Any cancellation must be received by Kyani within the three day period to be valid. If Autoship selected: I authorize Kyani to charge any of the payment methods I have established with Kyani for my monthly Autoship order, plus shipping and handling charges and my state and local sales taxes (if applicable).

Signature

Date

I understand that upon approval of this application the credit card information above will be charged for the cost of the options I have selected on this form.