



MEMBER AUTO SHIP FORM

EDC Wellness Corporation
 #200 – 1654 Renfrew St. Vancouver, B.C. Canada V5K 4C9
 Tel: 604 562 7565 Toll Free: 1 877 255 4488 Fax: 604 684 2017
 www.edcwellness.ca info@edcwellness.ca

PLEASE PRINT CLEARLY

Name: _____ ID# _____ Date:

Phone # () _____ - _____ E-mail: _____

Address: _____ Suite # _____

City: _____ Prov/State _____ Postal / Zip Code _____

Special Instructions: _____

To receive commissions and bonuses all EDC Members must have a minimum monthly Auto Ship of 50 PV

Monthly Auto Ship orders are shipped on the same date as entered above with the exception of weekends and holidays. You may change your standing Auto Ship any month by checking the appropriate over-ride box on the Product Order Form. Your new order must match or exceed 50 PV. Your current Auto Ship will not be sent that month.

You may cancel or change Auto Ship 7 days prior to shipping date (must be via fax). **There is no minimum Auto Ship to purchase wholesale only.**

Item #	Product Description	QTY	PV	Unit Cost	Total
600	EDC Basic: RF1, RF2, RF3 and 2 Value Cards A Saving of \$30		50	\$90.00	
601	Your choice				

	Product Cost	
<i>Multiply Product Cost by 7% or add \$7, whichever is greater =</i>	Shipping Cost	+
<i>Add Product Cost + Shipping Cost and multiply by 6% Canadian Residents Only =</i>	GST Applicable	+
<i>Multiply total cost of all non – nutritional products by 7% BC Residents Only =</i>	*PST Applicable*	+
	GRAND TOTAL	=

METHOD OF PAYMENT: Certified Check Cash Money Order

MC Visa Card # _____ Expiry Date:

Signature: _____

For Auto-Ship we accept checks that are dated for the 1st of the month (minimum 6 checks). I have enclosed ___ post-dated checks for \$_____ each.

Expect good things to happen!