



Introduced by:

Name:																				
Surname:																				
Cell No:																				
Parent Code:																				

Distributor Registration Form

New: Re-register:

Name: Title:

Surname:

ID Number: Date of Birth:

Sex: Male: Female: Country: SA: Other:

Physical Address: Street no & Name
 Suburb
 Town
 Province Postal Code

Tel no (home) Cell 1

Tel no (work) Cell 2

Email address

Alternative Contact Person:

Name & Surname:

Relationship: Cell no:

Preferred Method of Delivery: Delivery: Collect:

Delivery address: Street no & Name
 Suburb
 Town
 Province Postal Code

Contact person at Delivery Address:
 Contact Number:

Preferred Method Of Communication: SMS Email Post Phone
 Language understood: Eng Xhosa Sotho Zulu Other
 Preferred Time of Telephonic Communication: AM PM Other

- * I hereby confirm that I have read and understood and will abide by Acapella's terms and conditions as set out in the Compensation Plan.
- * I shall not make any misrepresentations about the company, it's products or it's compensation plan to whomever I may encounter.
- * I understand that it is not permissible to use Sunbird's trademarks, trade names or logos in any way, without any prior written permission from the Company.

Distributor Banking Details (For payment of potential rebates and incentives into your bank account)

Name of Account Holder: _____
 Bank Name _____ Type of Account: _____
 Branch: _____ Branch Code: _____
 Acc No:

 Distributor's Signature Date

For Office Use Only: Distributor Code