



PER4MAXX

Sales Associate Application Form Associates Buy Whole Sale and Receive FREE Shipping

As a Sales Associate; you are an Independent Contractor working for your-self. You are responsible for all sales tax reporting and agree to conduct business ethically and righteously. You agree to sell PER4MAXX as an Herbal Nutritional Supplement and Male Enhancement product. You agree (NOT TO) make any (FALSE, MIS-LEADING) or (MEDICAL CLAIMS) associated with the use or sale of PER4MAXX.

*All fields are required

*Please Print

*First Name *Last Name

*1. Mailing Address

*2.

* City

* State / Province

* Zip / Postal Code

*Country

*Phone No. ()

* Fax ()

* Email

* Please provide your FED I.D. No. or Soc Sec No.

Please fax your Sales Associates Application to: (808) 488-6593
or email us @ info@per4maxx.com for more information.