



OPTIMUM CHOICES, LLC  
*Healthy choices for people and pets*

# Autoship Agreement

## 1 Customer Information

Please enroll me as an Optimum Choices Autoship Customer

NAME (S) \_\_\_\_\_

MAILING ADDRESS (for mailing of information & order shipments) \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Ph. Evening ( ) \_\_\_\_\_ Day ( ) \_\_\_\_\_

E-mail address \_\_\_\_\_

## 2 Your Enroller

Please provide the following information on the Optimum Choices Distributor who enrolled you as a Customer

ENROLLER'S NAME (S) \_\_\_\_\_

ENROLLER'S ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

## 3 Autoship Payment Information

Please select one Autoship payment method:

VISA    MasterCard    Discover Card

\_\_\_\_\_  
 Credit Card Number

\_\_\_\_\_/\_\_\_\_\_  
 Expiration Date (Month/Year)

\_\_\_\_\_  
 Name as it appears on credit card

\_\_\_\_\_  
 BILLING ADDRESS (for credit card)  Billing Address same as Shipping Address

\_\_\_\_\_  
 BILLING ADDRESS (for credit card)

I understand that shipping, handling, and applicable sales tax will be added to the price of the order.

X \_\_\_\_\_  
 Card or Account Holder's Signature

## 4 Your Auto Ship Order

10 % off retail price, no minimum quantity  
 Any changes to your monthly Autoship must be received by the 1<sup>st</sup> of the month in the month of shipment. Please see the back of this Agreement for complete Autoship terms and conditions.

Item No.	Qty.	Description	Price
		Product Sub-Total	
		<b>-10% Autoship Discount</b>	
		Colorado Residents Sales Tax	
		Plus Shipping (see back)	
		<b>TOTAL</b>	

Please Ship My Autoship Order:

- 1st of Every Month
- 1st of Every Other Month
- 1st of Every Third Month

Start Date: \_\_\_\_\_

## 5 Signature

I verify that I HAVE CAREFULLY READ AND AGREE TO ALL THE TERMS AND CONDITIONS ON THE FRONT AND BACK OF THIS AGREEMENT. I understand that this Auto Ship Agreement will remain in effect until I send, IN WRITING, my cancellation of this Agreement to Optimum Choices, LLC, bearing my signature, printed name, and address. This cancellation will be effective in the calendar month in which it is received by Optimum Choices, LLC.

X \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_



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## Terms and Conditions

### The Autoship Program

The Autoship Program is an optional program in which Customers may participate and place a continuing or "standing" product order to charge to his or her credit card. By completing the Autoship Option payment information on the front of this Agreement, I authorize Optimum Choices, LLC to ship the product package option listed on the front of this agreement in the monthly interval I have selected. Optimum Choices is under no obligation to ship products if the authorized account(s) have been overdrawn or closed. If I am a Distributor, this Agreement does not supersede or modify in any way the terms and conditions of my Distributor Agreement or Optimum Choices's Policies and Procedures. Optimum Choices reserves the right to modify or terminate the Autoship Program in its sole discretion.

**PAYMENT AUTHORIZATION:** I authorize Optimum Choices to withdraw payment for my Autoship order(s) from my credit card identified on the front of this Agreement. Optimum Choices is authorized to withdraw payment equal only to the amount of the products, applicable sales tax, and shipping and handling of products that I order, or the Autoship orders I have selected. In order to prepare my Autoship order to ship on the indicated date, I understand that my credit card may be charged up to seven (7) days prior to the scheduled shipment date. I agree to pay a \$25.00 service fee in the event a charge is returned for any reason. I have the right to have the amount of any erroneous withdrawal deposited into my account as soon as reasonably possible and upon proper notification to Optimum Choices. I shall hold Optimum Choices harmless for all special or consequential damages, whether direct or indirect, resulting from any wrongful debit to my account.

**CHANGES:** To change Autoship order selections, method of payments, or the authorized amount, a new Customer Agreement form must be submitted to Optimum Choices. If more than one Customer Agreement has been submitted, the most recent Agreement will supersede all previous Agreements. Optimum Choices reserves the right to substitute products and/or change prices without notice. I understand that I will receive a 100% refund on any product where the price has been increased if I send back product to Optimum Choices within thirty calendar days of the date of the product order, or the period specified by state law of the state where I reside for such refunds, whichever is longer.

**TERM:** This Agreement will remain in effect until you: (1) elect to alter or change any aspect of this Agreement by submitting a new signed Customer Agreement; (2) send, *in writing*, your cancellation of this Agreement to Optimum Choices, with your signature, printed name, and address or (3) stop payment of any withdrawals by Optimum Choices by notifying your issuing bank at least three days prior to the scheduled charging of your account. Cancellation will be effective in the calendar month in which it is received by Optimum Choices, provided that your account has not yet been charged for that month; otherwise, cancellation will become effective in month following the month in which your notice of cancellation is received by Optimum Choices.

**SHIPPING & HANDLING:** There is a minimum shipping and handling charge of \$8.50. Otherwise, shipping and handling charges will be added to each order as follows:

- 1 bottle= \$9.50
- 2+ bottles= \$9.50+\$1.00/bottle
- Add extra for literature, and shipping outside the Continental U.S.

### Notice of Right to Cancel

DATE OF TRANSACTION: \_\_\_\_\_

**You may CANCEL this transaction, without any penalty or obligation, within THREE BUSINESS DAYS from the above date.**

If you cancel, any property traded in, any payments made by you under the contract or sale, and any negotiable instrument executed by you will be returned within TEN BUSINESS DAYS following receipt by the seller of your cancellation notice, and any security interest arising out of the transaction will be canceled.

**If you cancel, you must make available to the seller at your residence, in substantially as good condition as when received, any goods delivered to you under this contract or sale, or you may, if you wish, comply with the instructions of the seller regarding the return shipment of the goods at the seller's expense and risk.**

If you do make the goods available to the seller and the seller does not pick them up within 20 days of the date of your Notice of Cancellation, you may retain or dispose of the goods without any further obligation. If you fail to make the goods available to the seller, or if you agree to return the goods to the seller and fail to do so, then you remain liable for performance of all obligations under the contract.

**To cancel this transaction, mail or deliver a signed and dated copy of this Cancellation Notice or any other written notice, or send a fax to:**

**Optimum Choices, LLC, 416 Plateau Pky, Golden CO 80403-1533**

**NOT LATER THAN MIDNIGHT OF \_\_\_\_\_**  
**(3<sup>rd</sup> business day following the transaction date)**

**I HEREBY CANCEL THIS TRANSACTION.**

**Buyer's Signature \_\_\_\_\_**

**Date: \_\_\_\_\_**