

AUTOSHIP PRODUCT ORDER FORM \$60.00

You will need to complete the data below in order for us to place you on the Autoship Program. If you are unsure of how to fill out any of the entries, please call your sponsor for help. Make sure all entries are completely accurate. Autoship Orders should be faxed or emailed.

Shipping: (US Orders shipped UPS, Canadian Orders shipped Express Post)

We can ship to your address, or we can drop-ship this order to another address. Ship my product to:

Name _____ Shipping Address _____

Phone _____

Fax _____

E-Mail _____

For auto ship I desire: (please pick one of the following)

You receive one product of your choice,
Please choose one item:

Bone And Joint Extract	Immune Compound
Calcium Extract	Kidney / Bladder Extract
Cell Cleanse Extract	Liver Support Compound
Detoxifier Extract	Male Virility Extract
Dream-a-Weigh	Mega-Mineral Extract
Female Balance Extract	Nature's-Weigh
Foundation Tonic	Regeneration Extract
Gentleman Extract	Respiratory Extract
Gland Extract	Stabilizer Compound
Ginseng Extract	Stress Extract
Heart & Body Extract	

I can change my choice upon notifying Healthy-Hearts Club by the 15th of the previous month.

My payment method is indicated on the payment options sheet.

NOTE: PAYMENT OPTION 1 is not available for autoship.

I authorize Healthy Hearts Club hereafter HHC to debit my account, as indicated of the payment option form, \$60.00 US every 30 days. In return HHC agrees to ship the product of my choice. I understand this works as if I had placed and paid for a separate order every month. I understand that my signature is not required each time. I understand that if any fund transfer request is not honored I will be held liable for the required amount plus \$30.00 US service charge.

Signature _____

Print Name _____

Dated _____

NOTE: IF PAYMENT OPTION IS DIFFERENT THAN ORIGINAL APPLICATION A SEPARATE SHEET INDICATING THIS MUST BE ATTACHED.

HEALTHY HEARTS CLUB
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