

Activate Your Stem Cells

ORDER FORM US AND CANADA



30 Patches in 1 Sleeve
1 Sleeve Equals 1 Month Supply
Wear 1 Patch a Day: 12 HOURS ON to Activate and 12 HOURS OFF to repair
(One time use only, per patch)

RETAIL Check the box next to your choice) PLUS TAX AND SHIPPING

1 Sleeve - **\$149.95** - Points 77

Monthly Quantity



PREFERRED CUSTOMER MONTHLY SUBSCRIPTION 1ST ORDER Check the box next to your choice) PLUS TAX AND SHIPPING

1st Order/1 Sleeve - \$99.95 + \$19.95 = **\$119.90** - Points 43
 Plus \$350 worth of FREE product samples for 6 months
 10 patch sample each month: Month 6 Receive FREE: 1 X39 and 1 Surprise Full Sleeve
(You must stay on Autoship the entire 6 months to receive all your gifts)



Monthly Quantity Date To Start



PREFERRED CUSTOMER MONTHLY SUBSCRIPTION AUTOSHIP ORDER Check the box next to your choice) PLUS TAX AND SHIPPING

1 Sleeve - **\$99.95** - Points 43

Monthly Quantity

WHOLESALE Check the box next to your choice) PLUS TAX AND SHIPPING

Bronze - \$124.95 (1 Sleeve)
 Unit \$124.95 - Points 77
(includes \$25 Starter Kit)

Gold - \$499.95 (5 & 1/2 Sleeves)
 Unit \$99 - Points 275
(\$25 starter kit fee waived)

Diamond - \$1,599.95 (19 & 1/2 Sleeves)
 Unit \$84 - Points 390 (1st Month)
 (110-2nd Month, 110-3rd Month)
(3 months active autoship included with this pack) (\$25 starter kit fee waived)

Silver - \$299.95 (3 Sleeves)
 Unit \$99 - Points 165
(\$25 starter kit fee waived)

Platinum - \$999.95 (12 Sleeves)
 Unit \$84 - Points 350
(\$25 starter kit fee waived)

1 Sleeve of X39 Patches = 2 Sleeves of any other Lifewave Patches



WHOLESALE MONTHLY AUTOSHIP ORDER Check the box next to your choice) PLUS TAX AND SHIPPING

1 Sleeve - **\$99.95** - Points 77

Monthly Quantity Date To Start

PERSONAL INFORMATION

First Name: _____ Last Name: _____ Date of Birth: _____ SSN: _____
(OPTIONAL)

Create Your Website: lifewave.com/ Password: _____

Shipping Address: _____ City: _____ State: _____ Zip Code: _____

Email: _____ Mobile Number: _____

PAYMENT METHOD

Visa Master Card American Express Discover

Name on Card: _____ Card Number: _____ Exp. Date: _____ CVV: _____

Billing Address: _____

City: _____

State: _____ Zip Code: _____

YOUR CONTACT LABEL HERE