

# 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

90 DAY MONEY BACK GUARANTEE

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

Monthly Quantity

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

90 DAY MONEY BACK GUARANTEE

1st Order/1st Sleeve - \$99.95 + \$19.95 (1 time fee) = **\$119.90** - Points 43  
and then **\$99.95** there after.

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

### WHOLESALE DISTRIBUTOR PRICING - PICK YOUR PACK Check the box next to your choice) PLUS TAX AND SHIPPING

30 DAY MONEY BACK GUARANTEE

**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 DISTRIBUTOR 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