

If you do not intend to be the only person with rights to place orders, make changes, or obtain other information related to this account (i.e. spouses, business partners, etc.), please submit this completed Group Membership Addendum Form with your Getting Started Form.

Business Entity ID # (Employer or Trust Identification #): 

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Amended

**Complete the fields below for EVERY individual affiliated with this business entity and therefore this group membership, and attach to a completed Getting Started Form. This application cannot be processed unless it is completely filled out.**

Name (please print legibly)	Social Security #	Principle Officer Title (if applicable)	Phone	Signature

**Please use additional forms if necessary to include all necessary parties.**

I have attached the articles of incorporation and bylaws. 

INITIAL
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By signing above, we certify that every individual affiliated with this business entity is identified above and that no one has any beneficial interest in any other Synergy Team Membership. We hereby agree to be bound by the Terms and Conditions located on page 2 of the Getting Started form, which by reference are fully incorporated into this agreement. We certify that we are of legal age and are able to enter into this contract. We have read and agree to the company’s Policies and Procedures and agree to the terms of confidentiality contained therein.