



# Preferred Auto-Ship Club - Enrollment/Change Form

[www.innatesource.com](http://www.innatesource.com)

Innate Source, LLC  
3620 W 10th St B, PMB130  
Greeley CO 80634

**Please visit our website to find out about special discounts for our Preferred Club members!**

**BILL TO:**

Name:	_____
Address:	_____ _____
City:	_____
State:	_____
Zip:	_____

**SHIP TO:**

Same as Billing Address

Name:	_____
Address:	_____ _____
(Physical shipping address required; no P.O. boxes)	
City:	_____
State:	_____
Zip:	_____

**CONTACT INFO:**

Daytime Phone No:	(____) _____	Evening Phone No:	(____) _____
Email Address:	_____		

**Please check one of the following:**

- Enroll me as a new member
- Update my existing enrollment
- Cancel my enrollment

Sign here to confirm cancellation request: X

**What month do you wish to start?**

\_\_\_\_\_

**How often do you want your orders shipped?**

- Monthly
- Every other month
- Quarterly

**What monthly cycle do you prefer?**

- Please ship around the 1st of the month (1st-5th)
- Please ship around the 15th of the month (15th-19th)

NOTE: Please allow a window of a few days beyond the target ship date for weekends, holidays, office closures, etc. In order to allow for any last-minute changes, we do not ship *earlier* than the target ship date unless pre-arranged with the customer.

**Please include the following items in my standing order:**

ITEM #	QUANTITY PER ORDER	PRODUCT DESCRIPTION	PRODUCT SIZE		

NOTE: You will receive an email reminder with order details and the amount to be charged several days prior to each shipment. To modify your standing order, please reply to the reminder email or call us beforehand. We are glad to assist with changes.



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**Page 2 of this form is required only if you are a NEW enrollee or updating your credit card information.**

**Payment Information:** (new enrollees or card changes only)

<input type="checkbox"/> VISA	<input type="checkbox"/> Discover
<input type="checkbox"/> MasterCard	<input type="checkbox"/> American Express
<b>Card No.:</b>	<input type="text"/>
<b>Exp Date:</b>	<input type="text"/> / <input type="text"/>
	<b>CVV:</b> <input type="text"/> <i>(* required)</i>
<b>Name as it appears on the credit card:</b>	
<b>Cardholder signature:</b>	X <input type="text"/>

\* The 3-digit CVV code can be found on the back of your card (except for AMEX, which displays a 4-digit code on the front).

**TERMS OF AGREEMENT:**

By enrolling in the Innate Source Preferred Auto-Ship Club, you will automatically receive your standing order according to the schedule you have selected above. Innate Source will keep your credit card number on file to be charged as each order is shipped. You may cancel your enrollment at any time by submitting this form, checking the cancellation box, and signing. You may change your standing order at any time by calling us or re-submitting this form. Enrollment cancellations must be received at least 2 business days prior to your next scheduled ship date in order to become effective beginning that month. Otherwise, the cancellation will become effective the following month. InnateSource.com, LLC reserves the right to discontinue or modify the Preferred Auto-Ship Club at any time, upon notification to registered enrollees.

I have read, understand, and accept the above Terms of Agreement. I wish to enroll in the Innate Source Preferred Auto-Ship Club.		
<b>Signature Required for New Enrollees:</b>	X <input type="text"/>	<b>Date:</b> <input type="text"/>

**Comments, Suggestions, or Special Requests:** *How can we better serve you?*

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**Please submit completed forms to us by mail or fax.** Changes to existing enrollment accounts may be sent to us via email, however we do not recommend sending credit card information via unsecured email channels. Thank you for your enrollment!