



WorldVentures™, Inc. Associate Application

Applicant Information

Full Name (Last, First, Middle)		Social Security/Tax ID/EIN#:	Date of Birth: (must be 18):
Address (NO P.O. Box):		City:	
Address 2:		State/Province	Zip:
Home:	Work:	Mobile:	Fax:
Company Name(Only if LLC)		Email: (Required):	

*Social Security or Federal Tax ID# is required for all New Member Applicants.

Sponsor Name:	FAVORITE COLOR GREEN	
New Website Name:	.worldventures.biz	Password: 12345

DreamTripsU Membership: \$99.99 + \$20.99/month*

We're offering you "The Trip of a Lifetime... Monthly!" Join our exclusive, invitation-only travel club. Access a calendar of over 400 DreamTrips per year and a built-in community of fun, excited, fellow vacationers.

DreamTripsU Representative Business System (RBS): \$24.99 + \$6.99/month

All Representative Applicants must purchase a WorldVentures RBS (Optional in North Dakota). The RBS is an online system that includes a Personalized Website and Back Office, online Training Program with essential Sales and Marketing tools to help you build your WorldVentures business as well as a Representative Welcome Kit.

Purchase BOTH (DreamTrips) & the (RBS): \$124.98 + \$27.98/month

*Monthly Fees are automatically charged to payment information on file. First month's Fees are charged at the time of purchase. Reps may change payment information on file at any time.

EFT Payment

Bank Name: _____ Bank Telephone: _____
 City: _____ State: _____ Zip: _____
 Routing #: _____ Account Number: _____

Payment

Card Type: M/C VISA AMEX
 Name on Card: _____ Billing Phone Number: _____
 Card#: _____ Exp. Date: ____/____/____ 3-Digit CV2 Code: _____
 Billing Address: _____
 City: _____ State: _____ Zip: _____

I have read and understand the Terms & Conditions. I authorize WorldVentures™ Holdings, Inc. to initiate an electric debit to my credit card. This authorization is to remain in full force and effect unless I provide written notification to WorldVentures™ Holdings, Inc. within 5 business days of monthly billing date. I agree to participate in the WorldVentures™ training programs appropriate to my position. I unconditionally agree to all the terms and conditions set forth in this agreement including the terms and conditions set forth in the Policies and Procedures. I have chosen to participate in the above capacity and warrant to WorldVentures™ that I have read and understood this agreement before signing. I understand that participation in this program does NOT guarantee or assure any profits or success. I certify to WorldVentures™ that no such representations of income or success have been made to me by WorldVentures™ or any Independent Associate, or I will notify WorldVentures™ in writing of such representation(s) within (3) days of signing this agreement.

Applicant's Signature: _____ Date: _____