



HTE Canada Inc.

30 West Beaver Creek, Unit 14, Richmond Hill, ON L4B 3K1

DISTRIBUTOR APPLICATION FORM

Process this Application online at: <http://www.hteamerica.com>

OR

via Fax: (866) 483-8880

Questions? Please Call a Customer Service Representative at: (866) 483-8888

If you would like to register your distributorship under your place of business, the name of your business must go in the section below.

| | |
|-----------------|----------|
| ASSIGNED ID NO. | A |
|-----------------|----------|

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|-------------------------------|------------|-----|-----------|--|--------------|---------------|
| BUSINESS NAME | | | | BUS. NO.: | | |
| APPLICANT | FIRST NAME | MI | LAST NAME | <input type="checkbox"/> COMPANY <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE | S.I.N. : - - | DATE OF BIRTH |
| | | | | | | |
| | | | | | | |
| SPOUSE | FIRST NAME | MI | LAST NAME | | S.I.N. : - - | DATE OF BIRTH |
| | | | | | | |
| PHONE FAX & E-MAIL | PHONE | FAX | | E-MAIL | | |
| | | | | | | |

MAILING ADDRESS

| | | | |
|----------------|----------|-------------|----------------------|
| STREET ADDRESS | | | |
| | | | |
| CITY | PROVINCE | POSTAL CODE | COUNTRY (If foreign) |
| | | | |

SHIPPING ADDRESS (Complete only if different from above)

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|----------------|----------|-------------|----------------------|
| STREET ADDRESS | | | |
| | | | |
| CITY | PROVINCE | POSTAL CODE | COUNTRY (If foreign) |
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| Placement Sponsor (Where applicant will be placed) | FIRST NAME | MI | LAST NAME | ID NO. |
| | | | | A |

The undersigned hereby applies for becoming a Distributor of Hsin Ten Enterprise Canada Inc., (HTE Canada) and acknowledges that he/she:

1. Shall abide by and be subject to the terms and conditions of the Distributor Agreement set forth on the back of this Application and the Policies and Procedures of HTE Canada which can be found in the Manual and are incorporated herein by reference as they are now or may be amended;
2. Shall be entitled to purchase product from HTE Canada, build a sales organization, and enjoy benefits available to all Distributors, in accordance to HTE Canada's Distributor Agreement;
3. Understands that a Distributor does not receive any remuneration from sponsoring other Distributor but that any profits or bonuses will be earned only as a result of the sale of the product set forth in the;
4. Must mail the original copy of this form back to HTE Canada for processing and filing purposes after filing out this form accurately and completely.
5. The term of this Distributor Agreement shall commence on the Date of Acceptance indicated below and shall terminate upon the Anniversary Date if not renewed or, if not terminated sooner as provided in the Agreement, or upon the mailing of a written termination notice.
Distributor has received, read, understands, agrees to be bound by the terms, conditions of this Agreement, all documents referred to herein. as such may be amended upon acceptance by the company.

FOR OFFICE USE ONLY

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| |
| INTERNATIONAL SPONSOR |
| APP. FORM PROCESSED DATE |

X

Authorized Signature for Distributor

Date

REV. 3/15/05

Authorized Signature for HTE Canada

Date