



Nutrition Club Registration Form – South Africa



WHO NEEDS TO SUBMIT A REGISTRATION FORM?

Distributors operating Nutrition Clubs in *non-residential* locations are required to submit a *Registration Form* to Herbalife, prior to the official opening date of their Club.

In addition to completing the Registration Form, Distributors are required to meet the following requirements prior to signing a lease, sublease or purchasing a commercial location:

- 1. Be a Distributor for at least 90 days in order to obtain training and experience about the Herbalife business;
- 2. Achieve 7,500 or more Total Volume after qualifying to Fully Qualified Supervisor level;
- 3. Complete the process required by Herbalife at that time for site location, proposed plaque, covering, business plan, training and other matters.

Distributors operating Nutrition Clubs from residential (from their home) locations are also encouraged to submit a Registration Form.

WHY DO I NEED TO SUBMIT A REGISTRATION FORM?

Submitting your *Registration Form* will help you stay connected with the latest news and updates on Nutrition Club trainings and promotions. This registration process will allow Herbalife to review your proposed Club name, location, plaque, window and door covering ideas prior to your Club's opening date to avoid premature expenditures that may not be compliant with Herbalife's *Rules of Conduct*. As stated in Herbalife's *Nutrition Club Rules*, Nutrition Clubs are not franchises or retail locations.

Information about plaque and window/door covering requirements can be found in <u>Rule 8.4.3 Nutrition Club</u> <u>Exterior Signage</u> and <u>Rule 8.4.4 Nutrition Club Exterior</u>. Any missing information may delay the confirmation of your Registration.

DO I NEED TO SUBMIT ADDITIONAL INFORMATION WITH MY REGISTRATION FORM?

Yes. Please, submit the following with your completed Registration Form:

- A photo or drawing of the plaque including a brief description with the dimension/size and location of the plaque;
- A photo or drawing of each window and door covering including a brief description, with the dimensions, locations number; and coverings needed;
- An overall photo that captures the building's entire exterior with the Club's structure and any plaque, signage or message, all windows, doors and the surroundings visible to passers-by.

PRIMARY NUTRITION CLUB OPERATOR

Only one Operator is responsible for submitting a Nutrition Club *Registration Form*. This Operator is considered the **Primary Nutrition Club Operator**. One *Form* is required for every non-residential Nutrition Club location. Secondary Club Operators (if any) may be listed on the *Registration Form*.

WHERE DO I SUBMIT MY REGISTRATION FORM AND ADDITIONAL INFORMATION?

For your convenience, there are three (3) simple ways to submit your *Registration Form* and the additional information required:

- 1. **Online:** Go to MyHerbalife.com and login > go to quick links on home page > select Registration and select "New Club Registration"
- 2. Online Support via MyHerbalife.com
- Mail: Herbalife International South Africa Ltd, Private Bag X86, Halfway House, 1685, South Africa

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PRIMARY (MAIN) NUTRITION CLUB OPERATOR'S INFORMATION:

Last Name:
First Name:
Primary Distributors ID#:
Team Level:
Country:
Club Address:
City:
Country:
Postal Code:
Main contact number:
Alternate contact number:
Email:
Website:
Club type: □ Residential □ Non-Residential □ Satellite Club
$Non-Residential\ Sub-type:\ \ \ \Box\ Single\ Operator\ (Traditional)\ \ \ \Box\ Multiple\ Operators\ (Central/\ Multi-Club)\ \ \Box\ Other$
The Club is: □ Existing OR □ Planned - Date of Opening or estimated opening:
Club Name: □ Proposed Club name:
Primary language spoken in club:
Seating Capacity:
Average daily consumptions/attendees expected:
What percentage of your business will you expect to come from the Club?
For changes to the Primary Operator, both Current and New Operator must sign this form.
□ I previously submitted this form, but have an update/change to my Nutrition Club name, plaque and/or window coverings.
□ I am closing or have closed my Nutrition Club. Date of closure:
□ I wish to change Primary Operator to ID #:
Did you receive any training to open/operate a Nutrition Club?
□ I was trained in my Upline's Nutrition Club
Date: Upline Name:
□ I participated in an Herbalife Independent Distributor Nutrition Club Training Date: Event Name/Location
□ I participated in an Herbalife Corporate Nutrition Club Training Event
Date: Event Name/Location
□ Completed the Nutrition Club Operator's Training (3 modules) on MyHerbalife.com
Date:
□ I did not receive training □ Other:
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Number of additional Operators who operate the Club?
Additional Club Operator information
Operator name:
Operator ID#:
Team level:
Operator name:
Operator ID#:
Team level:
If sharing your Club with more than two (2) other Operators, submit the details requested on a separate page
For marketing purposes, select Business Methods conducted at this Club: □ Weight Loss Challenge □ Total Plan □ Wellness Coach □ Other
Club hours of Operation:
□ Club is open all day Monday – Friday from to
OR daily hours of operation: Morning: to Afternoon: to Evening: to
□ Club is open all day Saturday from to
OR daily hours of operation: Morning: to Afternoon: to Evening: to
□ Club is open all day Sunday from to
OR daily hours of operation: Morning: to Afternoon: to Evening: to
Comments:
I acknowledge that I have reviewed and understand Herbalife's Rules of Conduct, which include Nutrition Club Rules. By signing this Registration Form I acknowledge and consent to HERBALIFE SOUTH AFRICA PROPRIETARY LIMITED. Ground Floor, Building 32 Woodlands Office Park, Woodlands Drive, Woodmead, Gauteng, 2191, South Africa; as the controller will collect and process my persona data provided in this Registration Form to fulfill contractual obligations, for quality checks which is Herbalife's legitimate interest and fo the fulfillment of duties specified in laws to which I and Herbalife are subject. Failure to provide the data makes it impossible to fulfill these obligations. My personal data will be kept as long as required by law or necessary for the above purposes. HERBALIFE SOUTH AFRICA PROPRIETARY LIMITED, Ground Floor, Building 32, Woodlands Office Park, Woodlands Drive, Woodmead, Gauteng, 2191, South Africa may share my data with Herbalife International of America Inc. and its affiliates. A list of Herbalife subsidiaries can be found online a https://www.herbalife.co.za/ HERBALIFE SOUTH AFRICA PROPRIETARY LIMITED, Ground Floor, Building 32, Woodlands Office Park Woodlands Drive, Woodmead, Gauteng, 2191, South Africa may also share my data with third parties pursuant to the Rules of Conduc and Nutrition Club Rules. In addition, I acknowledge and consent to Herbalife sharing my Nutrition Club's contact details with Herbalife Distributors. Those recipients of data located in countries outside of the EU such as the United States may not offer the same level o data protection as my own country. Herbalife has put in place contractual mechanisms to reasonably ensure that the EU personal data that are shared with Herbalife subsidiaries outside of the EU are secure at all times and processed in accordance with the applicable data protection legislation. Depending on the applicable law, I may have various rights in respect to my personal information towards Herbalife such as a right of access, rectification, restr
Please be aware that an incomplete form may delay the plaque, window and door covering confirmation process of your Nutrition Club Failure to submit a Registration Form to Herbalife may result in sanctions to your Distributorship.
Current Primary Operator Signature:
*Now Primary Operator Signature:

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