

PPARS CENTURY SDN. BHD.
(Co. No. :899873-v)
BV03F10 (3rd Floor)
IOI Boulevard, JalanKenari 4,
Bandar Puchong Jaya,
47100 Selangor.
Website: www.crypto.com.my
Tel: 03-80765580 Fax: 03-80765590

## APPLICATION FORM TRIPLE SHIELD GUARANTEE

(PRIVATE & CONFIDENTIAL)

A. APPLICANT INFORMATION								
FULL NAME	MR / MRS / MS							
NRIC (NEW)				(OLD)				
BIRTH DATE				AGE	G	ENDER MALE		
						FEMALE		
ADDRESS								
TELEPHONE	(MOBILE)		(HOME)		(OFFICE)			
EMAIL					NATIONALITY			
RACE								
		_						
B. MEDICA	L INFORMATIO	N						
HEIGHT		BLOOD PRES	SSUBF		WEIGHT			
	CARDIOCRAM	DEGOD I NEC			WEIGHT			
ECG (ELECTRO								
TYPE OF ILLNE								
OTHER MEDICA	AL CONDITION							
MEDICAL REPO	ORT ATTACHED							
DATE OF REPO	RT							

C. TRIPLE SHIELD	GUARANTEE PACKAGE	<b>.</b>		(PRIVATE & CONFIDENTIAL)
PACKAGE TYPE AD	VANCE (3 MONTHS)	INTENSE (6 MONTHS		
DISTRIBUTOR NAME		AREA		
PACKAGE PRICE				
D. DECLARATION	I			
•	tion stated in this application a misrepresentations of facts ca			-
SIGNATURE OF APPLICANT		APPLIC	CATION DATE	
E. FOR OFFICE USE	ONLY			
APPLICATION STATUS	APPROVED DECLINE	ED		
PACKAGE SERIAL NUMBER				
APPROVE BY	DA	TE		

## **DISCLAIMER:**

- 1. PPARS CENTURY SDN. BHD. (from here onwards called "The Company") holds full right in approving or declining any applications.
- 2. Processing of application can take up to 48 hours and the Company will notify applicant on the status via phone call, email and SMS.
- 3. Application can only be made when purchasing Triple Shield Guarantee packages.
- 4. Applicant must take another medical test and submit the result to the Company after consuming the products for 3 months or 6 months (depends on package),
- 5. In case of no changes in applicant's medical condition based on the latest medical test after 3 to 6 months consumption, applicant can claim for full refund from the company.
- 6. Company has the right to keep applicant's medical reports for references.