Scentsy INDEPENDENT CONSULTANT

Order Form

Date _____

Host _____

Consultant _____

Name _____

Address _____

_____

City _____

State _____ Zip _____

Day Phone _____

Evening Phone _____

Email* _____

By providing my email, I authorize Scentsy and/or the above Consultant to email information and promotions to me.

Qty	Product Code***	Product Description	Unit Cost	Total Cost

Cash ☐ Credit Card ☐ Check ☐ # _____

Name _____

Card # ☐☐☐☐ - ☐☐☐☐ - ☐☐☐☐ - ☐☐☐☐

Billing Zip Code _____

Expiration Date _____ Security Code ☐☐☐

Signature _____

You, the buyer, may cancel this transaction at any time prior to midnight of the third business day after the date of this transaction. See the notice of cancellation on the back of this form for an explanation of this right. CANCELLATION DATE: _____

Subtotal +	
Shipping** +	
Sales Tax +	
Total Amt =	

**SHIPPING

U.S.: FREE=$150+
10%=$50-$149.99
10%=$50+ (Direct-ship only)
$5=Less than $50

AK, HI, PR, GU, APO/FPO: 10%=$150+
20%=$35-$149.99
20%=$35+ (Direct-ship only)
$7=Less than $35

***For Consultant Use Only

US

White—Scentsy Consultant Copy

Yellow—Customer Delivery Copy

Pink/Gold—Customer Order Copy

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