

# ΟΔΗΓΟΣ ΕΓΓΡΑΦΗΣ ΝΕΟΥ ΜΕΛΟΥΣ

## **ΒΗΜΑ 1:**

**Συμφωνία του Νέου Μέλους με τους Όρους και τις Προϋποθέσεις της DXN**

**Become A Distributor** Already DXN Distributor, login [here](#)

**DXN New Distributor Application and Agreement**

Welcome to DXN! Here you can register as NEW DXN Distributor !

Please take a few minutes to fill-in the registration details carefully to ensure that the information provided is correct. The email address will be used for all the future correspondence relating to your distributorship and rewards. Points the Distributor must take note of:

**Distributor must know :**

1. The sponsor code (except the default sponsor 128888888) cannot be changed once the application has been submitted.
2. If you already have registered in DXN prior to this registration and if it is active, this registration will be invalid and all the business done under this distributorship will be transferred back to the previously registered distributor code.
3. This system allow you to do distributor registration, online starter kit redemption, genealogy management, group sales report, check your e-Point and Bonus information, get latest News and Events, get order tracking status and edit/update your personal information.
4. Upon completion of the new distributor registration, you will be given a distributor code to make product purchase at nearest Branch or Service Center. The distributor code can be used to sponsor new distributor as well.
5. When your monthly purchase in any single country reached the minimum required sales, you will earn E-point in that particular month.
6. Distributor registered under this system will receive their earned point(s) in E-Point Only.
7. In order to redeem the earned point (s), distributors are required to purchase Starter Kit from any Branch/Service Center and register the kit code into the system.
8. For Registered Distributors without any transaction for the first 12 months will render their membership lapse and their status will be reflected in the system as 'Expired', as per the DXN distributorship expiration terms and conditions.
9. The distributorship is subject to DXN Distributorship Rules and Regulations and Distributor Terms and Conditions which may vary from one country to another. Kindly visit your nearest DXN branch or refer to your local Person In Charge via our contact information through <https://www.dxn2u.com/contact/index.php?lang=en> for version applicable to your country.

**ΒΗΜΑ 2:****Δημιουργία προφίλ**

- Επιλέξτε οποιαδήποτε ευρωπαϊκή χώρα από τον κατάλογο χωρών.

Για παράδειγμα: Ουγγαρία

- Θα δείτε ότι υπάρχουν 5 βήματα τα οποία πρέπει να συμπληρωθούν από το Νέο Μέλος.

- Το Νέο Μέλος πρέπει να συμπληρώσει υποχρεωτικά τα στοιχεία με αστερίσκο (\*).

1. Create Profile
2. Review
3. Select Product
4. Payment Info
5. Confirm

**New Distributor Registration Form**

\* required field  
\*Note: For Countries not listed under the selection list, kindly visit the respective country's branch for registration.

**Country \***

Tick here if you do not have Sponsor Code

**Sponsor Code \***

**Sponsor Name**

**Full Name \***

**Gender \***

**Birth Date [DD/MM/YYYY] \***

**IC No. / Passport No**

**Nationality \***

\*To receive order confirmation and transaction notification, it is important that DXN has your valid e-mail address or valid mobile number. DXN will not share your information with any non affiliated third parties.

**Mobile No \***

**E-Mail**

\*Please select your preferred language for displaying pages and email notification.

**Preferred Language \***

**BENEFICIARY INFORMATION**

**Name of Beneficiary**

**Relationship**

**Beneficiary Passport No.**

**Beneficiary IC. No**

**ADDRESS**

**Address**

**State / Province**

**City / Town**

**Post Code**

**ΒΗΜΑ 3:****Επανεξέταση**

Επιλέξτε με κλικ το κουμπί "Συνέχεια" μετά την επισκόπηση των δεδομένων που έχετε δηλώσει καθώς και την επιλογή για των όρων στο κίτρινο πλαίσιο.

1. Create Profile   2. Review   3. Select Product   4. Payment Info   5. Confirm

### Review Your Registration

Sponsor's Information	
Sponsor Code	: 128888888
Sponsor Name	: TEMPORARY

Applicant's Profile Information			
Country of Residence	: HUNGARY	Mobile No.	:
Full Name	: TEST MEMBER	E-mail	: yhlai@dxn2u.com
Birth Date	: 01/11/2000	Billing Address	: ADDRESS 1
Gender	: Male		
Nationality	: HUNGARY		
Preferred Language	: English		: TOWN , Bolzano
IC No. / Passport No	:		: code

Beneficiary Information			
Name of Beneficiary	:	Beneficiary Passport No.	:
Relationship	:	Beneficiary IC No.	:

**Newsletter Sign Up**

Sign up for our newsletter and get notification in your inbox when we publish news/latest announcement and exclusive deals

**Application Declaration**

- I declare that all details given are correct. Should there be any false information give, the company reserves the right to terminate this application without prior notice.
- I confirm that my spouse and I have not been active for the past 12 consecutive months or my spouse and I have never joined DXN at the time of this application.
- I understand that my distributorship with DXN will be valid upon approval of this application.
- I have read and agreed with all Rules and Regulations and Terms and Conditions of the DXN Company.
- In accordance with Personal Data Protection Act 2010 (Act 709) ("PDPA") which come into force on 15th November 2013, DXN Marketing Sdn Bhd ("DXN") is hereby bound to process personal data of DXN distributors by complying with PDPA. [Click here to read in detail](#)

I have read and agree to the above declaration.\*

I, the undersigned, by ticking the following checkbox, acknowledge that the data controller shall be entitled to manage any personal data I have provided here in accordance with the provisions of the GDPR and the data controller's privacy policy.\*

Note: Please review your information thoroughly and click on "Submit" button to complete registration.

Cancel   Back   **Continue**

**ΒΗΜΑ 4:****Επιλέξτε Προϊόν**

- Το νέο μέλος επιλέγει τον Τύπο Παραγγελίας.

- Για παράδειγμα: Αγορά 100 PV, το σύστημα θα εμφανίσει τα προϊόντα, παρέχοντας τη δυνατότητα στο χρήστη να επιλέξει τις ποσότητες προϊόντων που επιθυμεί να αγοράσει.

YOUR INFORMATION	
Type *	<input checked="" type="radio"/> 100 PV Purchase <input type="radio"/> IOC Order <input type="radio"/> DSP Order
Country :	HUNGARY
Name *	TEST BAAR JASNONE

SELECT PRODUCT				
+ Food & Beverage Series				
Product Code	Product Name	Price (Ft)	PV	Quantity
FB005	DXN Roselle Juice	4 035	16,5	<input type="text" value="1"/>
FB007	MORINZHI	3 965	16	<input type="text" value="0"/>
FB044	NUT RIZHI	8 230	20	<input type="text" value="0"/>
FB063	DXN ZHI CAFE CLASSIC	3 705	11	<input type="text" value="0"/>
FB065	DXN Morinzhi 700ml	8 060	35	<input type="text" value="0"/>
FB130	test	4 190	11	<input type="text" value="0"/>
+ Health Food Supplement Series				
Product Code	Product Name	Price (Ft)		
HF001	RG-90	11 035		
HF002	RG-30	3 905		

Total Weight (Kg)	0.000
Quantity	1
PV	16.50
Subtotal (Ft)	4 035
S&H (Ft)	1 000
Total (Ft)	5 035

SHIPPING INFORMATION	
Delivery Method	<input type="radio"/> Personal Receipt (Pickup at counter) <input checked="" type="radio"/> GLS Home Delivery (Deliver To Home Address) <input type="radio"/> GLS Point (Pickup At GLS Point)
Address *	ALAMAT BARU
Post Code *	1213213
City *	ASASD
State *	
Mobile No *	123456789
Email *	yhlai@dxn2u.com
Country *	HUNGARY

Cancel Back Continue

**ΒΗΜΑ 5:****Επιλογή παράδοσης / παραλαβής παραγγελίας**

- Εισαγάγετε τις πληροφορίες αποστολής ή την παραλαβή από τα γραφεία της DXN.
- Για παράδειγμα: ACS Delivery
- Έπειτα κάνετε κλικ στο κουμπί "Συνέχεια / Continue"

SHIPPING INFORMATION ↓

**Delivery Method**  Personal Receipt (Pickup at counter)  GLS Home Delivery (Deliver To Home Address)  GLS Point (Pickup At GLS Point)

**Address \***

**Post Code \***

**City \***

**State \***

**Mobile No \***

**Email \***

**Country \***

**ΒΗΜΑ 6:****Επιλογή Τρόπου Πληρωμής**

1. Create Profile → 2. Review → 3. Select Product → 4. Payment Info → 5. Confirm

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Name: TEST BAÁR JÁNOSNÉ      DATE: 2018-11-21

Please verify your shipping address before proceeding the order. Incorrect shipping information may result DELAY or ADDITIONAL CHARGE.

Shipping Information  
Personal Receipt  
DXN Shop, Teréz krt. 6. 1066 BUDAPEST

ITEM#	DESCRIPTION	UNIT PRICE	QUANTITY	PRICE EXCL ÁFA	PV
HF001		11 035	1	8 089	39
HF029		7 980	1000	6 244 000	33 000
SUB TOTAL (Ft)				6 252 689	33 039
ÁFA Amt (Ft)				1 688 346	
AMOUNT INCL ÁFA (Ft)				7 941 035	
TOTAL (Ft)				7 941 035	

Choose Payment Option

Cash On Delivery

Credit/Debit Card

Total Amount Ft: 7 941 035

**BILLING ADDRESS INFORMATION**

Fullname: TEST BAÁR JÁNOSNÉ

\*Address: ALAMAT BARU

Country: HUNGARY

\*State/Province: -- Select State --

\*City/Town: -


\*Postcode: 123456

Please note that in case your made purchases in our webshop, we must keep the personal data you entered for invoicing for eight years in accordance with directive C, paragraph 160, point 2 of the Law of Accounting of 2000.  
[Online Purchase Terms and Conditions](#)

**Note:**  
- Transaction consider as valid transaction upon payment confirmed by the company within 14 days from the invoice date.  
- DXN membership code will be given after payment confirmed by the company and membership join date will assign according to the payment confirm date.

I have read and agree to the above Terms and conditions

**ΒΗΜΑ 7:**  
**Επιβεβαίωση Εγγραφής – Πληρωμής παραγγελίας**

ORDER CONFIRMATION							
 <b>Thank you for your order.</b> Your order has been completed. Purchase confirmation has been sent to your email address.							
DXN Europe Kft Teréz krt. 8, 1066, Budapest, HUNGARY TEL: +36 30 700 4675 - FAX: - https://newworld.dxn2u.com/							
<b>PURCHASE ORDER</b> No. <b>HU-RM18112200078</b>							
<b>Billing Information:</b> TEST BAÁR JÁNOSNÉ ALKONY V 67 - T23456 Pest HU				Code: <span style="border: 1px solid red; padding: 2px;"> </span> Name: TEST BAAR JANOSNE Sponsor ID: 011158290 Sponsor Name: JANEKAND (M) SDN BHD Invoice Date: 22 November 2018			
Code	Product Name	Unit Price	Qty	Amt excl. ÁFA	ÁFA Amt	Amt incl. ÁFA	PV
HF001	RG-90	11 035	1	8 689	2 346	11 035	40
HF029	DXN Lion's Mane Tablets 120's	7 930	1000	6 244 000	1 686 000	7 930 000	33 000
Subtotal (F)				6 252 689	1 688 346	7 941 035	33 040
Grand Total Amount Due (F)				6 252 689	1 688 346	7 941 035	
<b>Special Delivery Instruction:</b> Total Weight (kg) : 60,060 Payment Information: Payment Method: OTP Bank Payment Amount: €17 941 035  The Company shall not be responsible for any mistakes contained in this Purchase Order  <b>Personal Receipt (Pickup):</b> DXN Shop, Teréz krt. 8, 1066 BUDAPEST							