

### Updating Email, Shipping/Billing Address or Phone Number

Update information by following one of the steps below:

#### 1. Back Office

Updating Email, Shipping/Billing Address for Account (Not including LRP Template\*)

- 1.1 Log in at [www.mydoterra.com](http://www.mydoterra.com)
- 1.2 Click the gear icon in the upper right hand corner
- 1.3 Under Personal Information select content to update
- 1.4 Click 'Save Changes'

Updating Email, Shipping/Billing Address or Phone Number for a LRP Template\*

\*LRP templates are not updated when information is changed in the Personal Information section of your back office.

- 1.5 Click the "SHOP" tab
- 1.6 Under "Edit a Scheduled LRP Order", click the gray button with the LRP order number
- 1.7 Click "edit" to update your shipping/billing address, payment information, email address, or your order processing date

#### 2. Member Services

- 2.1 Call 800-411-8151 for assistance
- 2.2 Email [service@doterra.com](mailto:service@doterra.com) with your Wellness Advocate number and the information you would like updated.
  - If you wish to update your email address, email [service@doterra.com](mailto:service@doterra.com) from your email address on file. If this is not a possibility for you, please submit this form with your updated email address.

Old email: \_\_\_\_\_ New email: \_\_\_\_\_

- To subscribe or update an email address for newsletters or dōTERRA Email Communication, email [editor@doterra.com](mailto:editor@doterra.com).

### Marriage or Legal Name Change (Excluding Divorce)

Please fill out the information below and attach one of the required documents to change your legal name on your account.

#### Current Information:

Wellness Advocate #: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Co-Applicant Name (if applicable) \_\_\_\_\_

#### Updated Information:

Wellness Advocate #: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Co-Applicant Name (if applicable) \_\_\_\_\_

Attach one of the five documents to designate proof of name change:

- Marriage License
- Court Petition for Legal Name Change, original or certified copy
- W-9
- Driver's License
- Social Security Number Card

Attach the proper documents to this form to indicate a name has legally changed and send to [dataentry@doterra.com](mailto:dataentry@doterra.com) or fax to 801-785-1476 with Attn: Data Entry.

### Adding a Co-Applicant

Please fill out the information below, and attach a Wellness Advocate Agreement to this form to submit a request to add a co-applicant to an account.

Co-Applicant Name: \_\_\_\_\_ Wellness Advocate #: \_\_\_\_\_

Send to [dataentry@doterra.com](mailto:dataentry@doterra.com) or fax to 801-785-1476 with Attn: Data Entry.

### Switching Primary and Co-Applicant

If you wish to switch the position of the Primary and Co-Applicant, fill out the information below and submit the required forms:

Wellness Advocate #: \_\_\_\_\_

Desired Primary: \_\_\_\_\_ Desired Co-Applicant: \_\_\_\_\_

Wellness Advocate Agreement       Account Transfer Request Form       Account Information Change Form

Send to [dataentry@doterra.com](mailto:dataentry@doterra.com) or fax to 801-785-1476 with Attn: Data Entry.

### Fixing a Birth Date or Social Security Number

If there is an error with the primary account holders birth date, please fill out the following information:

Wellness Advocate #: \_\_\_\_\_ Primary Name #: \_\_\_\_\_

Primary Birthday: \_\_\_\_\_

If there is an error with your Social Security Number please contact Data Entry by emailing [dataentry@doterra.com](mailto:dataentry@doterra.com) or fax to 801-785-1476 with Attn: Data Entry. Attach the following documents.

Wellness Advocate Agreement       W-9

In the subject line of the email, state: "Social Security Number Error".

### Changing an Account from Personal to Business Entity

If updating an account from a personal account to a business entity account, please contact Data Entry by emailing [dataentry@doterra.com](mailto:dataentry@doterra.com) or fax to 801-785-1476 with Attn: Data Entry. Please attach:

Wellness Advocate Agreement       Business Application Addendum       Account Transfer Request Form  
 Business License       W-9

If transferring a personal account to a business account that you have no part in, submit the same forms to the Placements team by emailing [placements@doterra.com](mailto:placements@doterra.com).

### Account Transfer

For account transfers, please refer to the account transfer form or contact [placements@doterra.com](mailto:placements@doterra.com).

### Account Changes Due to Divorce or Death

If changing the name on an account due to divorce or death, please contact our Compliance Department at [compliance@doterra.com](mailto:compliance@doterra.com). They will work with you to ensure you receive the best service for your case.

### Agreement & Signature

By submitting this Account Information Change Form, I affirm that the account is my only account and I have authority to make changes to this account. I further agree that the facts set forth in this form are true and complete. Upon Company's request, I will provide the Company with additional documentation to effectuate the requested change.

\_\_\_\_\_  
Primary Account Holder Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant Account Holder Signature

\_\_\_\_\_  
Date