

This form is required when any business entity applies to become a dōTERRA Wellness Advocate. Please complete this form and return it with all other requested materials at the bottom of this form to the dōTERRA Home Office for acceptance and approval. All persons having any legal or beneficial interest (e.g., officers, presidents, directors, shareholders) should be identified. You may submit as many addendums as are necessary to be complete. If any information changes, including any organizing documents, dōTERRA must be notified in writing and provided copies of relevant documents within thirty (30) days of the change to avoid a material breach of your Wellness Advocate Agreement. This addendum binds all persons having a beneficial interest in the applicant company by the dōTERRA Wellness Advocate Agreement and Policy Manual.

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

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### Business Name

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Name

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Position/Title in Business

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Email

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Signature

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Name

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Position/Title in Business

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Email

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Signature

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Name

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Position/Title in Business

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Signature

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Position/Title in Business

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### Federal Tax ID Number

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Social Security Number

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Phone

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Fax

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Date

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Social Security Number

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Phone

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Fax

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Date

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Social Security Number

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Phone

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Fax

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Date

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Social Security Number

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Phone

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Fax

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Date

## REQUIRED DOCUMENTS

- Completed dōTERRA Wellness Advocate Agreement
- Signed IRS Form W-9
- This Business Application Addendum
- Copy of the Company's Organizing Document (e.g., Articles Certificates, etc.)