

Membership and Support Agreement

Please take the time to read this agreement so that you can get the most out of our relationship, and so that we are in alignment. These items form part of our membership and support agreement. This document is intended to have legal significance (particularly the "Liability" section) and as such, I recommend you consult with your legal advisor.

To continue with our support arrangement, please send the full agreement back to me, AFTER FILLING IN THE AGREEMENT SECTION at the end.

Support:

This is available to you on a unlimited basis by phone as needed while a member.

Emails: Feel free to e-mail me for those quick questions or to clarify a point or to request support on a particular issue.

Referrals:

For a referral who becomes a member, we send you a check for \$249.25.

Billing:

Billing is by Credit Card and with a one time fee of \$997.00 for membership and a recurring monthly fee of \$34.95 to be auto-charged to you at the start of each month.

Termination of Agreement, and Non-Refundable Payments:

You may terminate the agreement at the end of any billing cycle. Membership goes for as long as you're getting great value for your money. If you're not, we change something, or we stop!

Please note your membership investment represents a commitment to you and to your goals. As such, your membership fee and your monthly payments are non-refundable.

Confidentiality:

I will respect the confidentiality of your information, except as otherwise authorized by you, or as required by law. I will obtain agreement from you before releasing your name as client or reference, or any other client identifying information. I will obtain agreement from you before releasing information to another person compensating me.

Initial here: _____

Liability

Responsibility:

I work on the basis that you are fully responsible for your own actions and decisions. I will offer suggestions, options and support, based on my own life and professional experience, but any decision about a course of action is yours, and you accept full responsibility for such decisions. You should carefully evaluate the consequences of various options, and decide accordingly. I make no representation, or warranty to you that any of the methods, instructions, or activities will work for your particular circumstances and in way guarantee any results.

Agreement not to hold liable, and indemnity:

You acknowledge that you will not hold me, any member or affiliate for any loss or cost incurred by you or in the event of any financial or emotional stress, or distress caused either directly or indirectly in relation to the membership or any support. You shall indemnify me, any member or affiliate in the event of any such claim, including but not limited to any claims made against me by any person related to or associated with you, including but not limited to your customers.

I reserve the right to terminate your membership immediately, and without prior notice.

Jurisdiction:

However unlikely, in the event of any disagreement or dispute between us, you agree that the laws of the State of Arizona, USA shall be applied to the agreement.

AGREEMENT SECTION

I understand and agree to the above terms and conditions.

How did you here about us: __www.nosalespressure.com__

Who referred you? : **Donna Allison donnaallison@earthlink.net 541-359-2562**

Your Name: _____

Your Signature: _____

Date: _____

(Please return this agreement by e-mail or fax)

Steve Blazevic
BlazeVic Funding Group
480-248-3868 - stjegan@cox.net
www.BlazeVicFunding.com

Recurring Credit Card Charge Authorization Form

I (we) hereby authorize Blazevic Funding Group to make a one time charge of \$997.00 and a recurring monthly charge of \$34.95 to my Credit Card listed below, and, if necessary, initiate adjustments for any transactions credited/debited in error. This authority will remain in effect until Blazevic Funding Group is notified by me (us) in writing to cancel it in such time as to afford Blazevic Funding Group and Credit Card company a reasonable opportunity to act on it.

(Name - PLEASE PRINT AS APPEARS ON CARD)

(Address - PLEASE PRINT)

(Phone Number - PLEASE PRINT)

(Email - PLEASE PRINT)

Please circle one: Visa / MasterCard

Account Number: _____

Expiration Date: _____

Three Digit Security Code: _____

By signing below I understand and agree that these charges are non-refundable.

(Signature)

(Effective Date)

Please return to:

Blazevic Funding Group
Steve Blazevic
16224 N 38th St
Phoenix AZ 85032

480.248.3868 – Phone
623-445-1997 - Fax
Stjepan@cox.net
<http://www.BlazeVicFunding.com>