



Australian Gold® & Swedish Beauty®



Premier Salon Bonus Cash Back Partnership Program 1-Year Agreement

_____ (Name of salon) agrees to feature, display, offer to sell, recommend, endorse or otherwise promote only Australian Gold® and/or Swedish Beauty® lotions in the salon. Features include displays and advertisement of Australian Gold and/or Swedish Beauty in your salon for the period of the promotional year 11-01-04 to 10-31-05.

In return for the feature promotion, the salon will receive the following rewards:

1. Advertising Allowance on Australian Gold and Swedish Beauty lotions will be increased by 5%.
Example: Current program of AG - 4%, SB - 4%, and 3% bonus for \$7,500 purchases will be increased to 16%.
2. Initial Promotional Package – **A \$500 Value!** Components of the initial package are as follows:

| | |
|--|----------------------------|
| A. AG or SB lighted sign | J. 3 Acrylic Shelf Talkers |
| B. AG and SB Window Clings | K. 2 Polo Shirts |
| C. 5 Bed Sanitized Signs | L. 6 Salon T-shirts |
| D. Vivid Write-on Board | M. 5 AG Black Mesh Bags |
| E. Salon Rug | N. 6 AG Hats |
| F. Interchangeable Point-of-Sale Counter Mat | O. 2 SB Visors |
| G. 6 Employee Sales Buttons | P. 2 Acrylic Room Signs |
| H. Poster & Promo Pack | Q. Product Training Book |
| I. 5 pair of Eyewear | |
3. FREE Regional Trainings geared toward our Premier Salons!

| | |
|--------------------------------|--------------------------------|
| Oakbrook, IL / St. Louis, MO | Cleveland, OH / Blue Ash, OH |
| Indianapolis, IN / Romulus, MI | Rutherford, NJ / Charlotte, NC |
| Coraopolis, PA / Columbus, OH | Atlanta, GA / Arlington, TX |
4. Access to our Premiere Salon Website, with exclusive offers on postcards, advertising templates, and much more!

_____ (Distributor name) will submit all information (invoices, advertisements, etc.) directly to AG/SB for reimbursement for _____ (name of salon). Should the salon decide to change Distributors during the year, you are required to notify AG/SB, in writing, of the reasons for the change in order for Australian Gold to be able to verify which distributor will be submitting paperwork for your claim.

Please send to Australian Gold at: 6270 Corporate Drive, Indianapolis, IN 46278, Attention: John Keiffner.

Please **PRINT CLEARLY** the information below.

_____ Salon Name _____ Distributor Name

_____ Owner's Name _____ Distributor Owner

_____ Signed _____ Date

_____ Address

For Internal Purposes Only:

_____ Telephone Number **Premier Website User Name:** _____

_____ **E-mail Address** **Premier Website Password:** _____

_____ Website

_____ Date

_____ AG/SB V.P. of Sales and Marketing _____ Date