



**ENAGIC FRANCE** (société commerciale étrangère)  
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# NAME CHANGE REQUEST

PLEASE FILL THIS DOCUMENT IN CAPITAL LETTERS AND PROVIDE ALL INFORMATIONS NEEDED

ID NUMBER

ACTUAL IDENTIFICATION DETAILS	NEW IDENTIFICATION DETAILS REQUESTED
Complete Name .....	Complete Name .....
Adress .....	Adress .....
City..... Zip .....	City..... Zip .....
Country .....	Country .....
Téléphone .....	Téléphone .....
E-mail.....	E-mail.....

Please verify that all information on this request is correct and accurate. Any request containing wrong information will be rejected.

**All Name Change requested are charged 40€ of administrative costs**

**METHOD OF PAYMENT**

WIRE TRANSFER TO ENAGIC  
*CIC Banque*  
*Enagic Europe GmbbH*  
*IBAN : FR76 3006 6105 5100 0200 9890*  
*156*  
*BIC : CMCIFRPP*

CREDIT CARD\*  
*Please contact the France office*  
*\*Maestro and Electron not accepted*

CHECK

**IMPORTANT:**

- Name changes can be processed only between people of the same family.
- It is not possible to transfer one's account to a third party.
- Please attach a copy of your ID card to this request (old and new applicants).
- All name changes must be approved by your 6A distributor.
- The applicant states to takeover any remaining payment on this account.

Date : ..... Place : .....

Date : ..... Place : .....

OLD APPLICANT Signature :

NEW APPLICANT Signature :

*(Signature area for Old Applicant)*

*(Signature area for New Applicant)*