

FARMASI

Parental Consent Form

In order for an individual under the age of 18 to join as a Beauty Influencer for FARMASI US, LLC you must include the following:

- Request must be made and sent by the parent/legal guardian showing proof of parental responsibility
- Must include a letter along with this form that clearly states you are aware and are granting permission of the individual to join the FARMASI business as a Beauty Influencer
- Farmasi must approve the proposed request.

Any requests submitted outside of the above guidelines will be considered on a case-by-case basis at the discretion of the Company.

I, _____, parent/legal guardian of _____ do hereby authorize for _____ to join the FARMASI US, LLC ("Company") business as a Beauty Influencer and abide by any and all Policies and Procedures the company has set forth. I confirm that all details presented are correct and I am able to give parental consent for my child to join the FARMASI US, LLC ("Company") business. I hereby release FARMASI US, LLC ("Company") from any potential or future liability or obligation caused by the following change. I understand is that this is a 1099 business and my child will be 100% responsible for the account. At the end of the calendar year, my child will receive a 1099 and will have to claim any earnings over \$600 per year on her taxes.

Thank you,

Name of Parent/Legal Guardian:	Name of Child/Individual:
Relationship of Parent/Legal Guardian:	Child/Individual SSN:
Parent/Legal Guardian Date of Birth:	Child/Individual Date of Birth:

Please E-mail your completed Parental Consent Form to compliance@farmasius.com. Send to the attention ("ATTN:") of the representative handling your request.

If you have further questions or would like to check the status of your request, please contact the FARMASI Compliance Department. Please allow 48–72 hours for processing.

*This form does not alter the contract that includes the Entrepreneur Application & Agreement, or release the Entrepreneur from any agreement with

_____/ Date _____
Parent/Legal Guardian Signature

_____/ Date _____
Child/Individual Signature