

\$299 Avini Experience™ Preferred Customer Packs



\$299 Plastic Cell Defender® Avini Experience™ Preferred Customer Pack

Worth 100 points | Retail Value: \$414

6 Plastic Cell Defender®



\$299 Glass Cell Defender® Avini Experience™ Preferred Customer Pack

Worth 100 points | Retail Value: \$395

5 Glass Cell Defender®



\$299 Healthwise Avini Experience™ Preferred Customer Pack

Worth 100 points | Retail Value: \$407

1 Plastic Cell Defender® • 1 Fiber+Probiotic • 1 Zmunity • 1 Nano Silver Spray • 1 Plus Relief Oral Spray



\$299 Joint Relief Avini Experience™ Preferred Customer Pack

Worth 100 points | Retail Value: \$412

2 Plastic Cell Defender® • 1 Plus Relief 3 Pack • 1 Plus Motion



\$299 Weight Management Chocolate Avini Experience™ Preferred Customer Pack

Worth 100 points | Retail Value: \$401

2 Plastic Cell Defender® • 1 Fiber+Probiotic • 2 TrimsScience Capsules®
1 TrimsScience® Protein Shake Meal Replacement Chocolate



\$299 Weight Management Vanilla Avini Experience™ Preferred Customer Pack

Worth 100 points | Retail Value: \$401

2 Plastic Cell Defender® • 1 Fiber+Probiotic • 2 TrimsScience Capsules®
1 TrimsScience® Protein Shake Meal Replacement Vanilla



PREFERRED CUSTOMER PACKS

Preferred Customer Name: _____ Email: _____

Preferred Customer Address: _____ Password: _____

New Website URL: _____ (avinihealth.com/URL) _____

Date of Birth: _____ Phone Number: _____

PRODUCT NAME	PRICE	ORDER
\$299 Plastic Cell Defender® Avini Experience™ Preferred Customer Pack	\$299	
\$299 Glass Cell Defender® Avini Experience™ Preferred Customer Pack	\$299	
\$299 Healthwise Avini Experience™ Preferred Customer Pack	\$299	
\$299 Joint Relief Avini Experience™ Preferred Customer Pack	\$299	
\$299 Weight Management Chocolate Avini Experience™ Preferred Customer Pack	\$299	
\$299 Weight Management Vanilla Avini Experience™ Preferred Customer Pack	\$299	
10% Rewards	TOTAL:	

Paid by: _____ Check Number: _____

Name on Credit Card: _____ CC#: _____

Expiration Date: _____ Security Code: _____ Phone: _____

Shipping Address: _____

Billing address if different from shipping address: _____