

Application for Approval of a Dermalogica Website within the UK

Date	
Name of Account	
Account Number	
Address	
Contact Name	
Phone Number	
e-mail address	

The above Account Holder requests review and approval of a Dermalogica website, with URL (website address) of _____

Log-in (if any): _____

Password (if any): _____

I confirm that I am the Account Holder named above, I (and any authoised representative or designate of my account) will maintain compliance with:

1. Dermalogica (UK) Ltd. Trading Terms & Conditions
2. Dermalogica (UK) Ltd. Website Requirements

(Prior to submitting your application form please refer to the Dermalogica (UK) Ltd. Website Requirements.)

Signature(s) of Account Holder(s)