

Market Change Request Form

Thank You for your business with Young Living. We are happy to assist you with updating your Young Living Account. Please complete the below form in its entirety to ensure an accurate and timely processing of your request.

Member Number:	
4 Digit Pin Number:	
Name on Account:	
Current Mailing Address on Account:	Desired Mailing Address on Account:
Address Line 1:	Address Line 1:
Address Line 2:	Address Line 2:
City:	City:
State/Province:	State/Province:
ZIP/Postal Code:	ZIP/Postal Code:
Country/Market:	Country/Market:
Qualifying Questions:	
1. Where is your current Residency and/or C	Citizenship?
2. Is this a temporary or permanent change?	
3. What is the reason for the change?	•
4. Are we changing both the shipping and m	ailing (billing) address? Y / N

a. If no, please provide the desired shipping address below



Desired Snipping Address on Account:	
Address Line 1:	
Address Line 2:	
City:	
State/Province:	
ZIP/Postal Code:	
Country/Market:	
Tax ID for Account (if applicable):	
Signature:	Date:

Please Note the following are required to proceed with this request.

- Request must come from the email address currently on the account.
- Request form must be physically signed by the current account owner.
 - Please provide a copy a copy of your Tax Id number (if applicable)

Please include all requested documents and forms that were outlined in the email you received from Account Updates