

# Membership Contract for Frau Fowler PMA

Located at: c/o 301 US 127, Lone Oak Unincorporated Community, Tennessee [ near 37377]

I do hereby apply for membership to Frau Fowler, a private membership association. With the signing of this membership agreement, I/we accept the offer made to become a member of Frau Fowler and have read and agree with the following Declaration of Purpose from Article 1 of Frau Fowler Articles of Association.

1.This Association of Members hereby declares that our main objective is to maintain and improve the civil rights, constitutional guarantees, and political freedom of every member. We believe that the Constitution of the United States is one of the best documents ever devised by man, and the signers of the Declaration of Independence did so out of love for their country.

2.We believe that the First Amendment of the Constitution of the United States of America guarantees our members the rights of free speech, petition, assembly, and the right to gather together for the lawful purpose of advising and helping one another in asserting our rights under the Federal and State Constitutions, and other founding documents.

IT IS HEREBY declared that we are exercising our right of “freedom of association” and “freedom of choice and education,” as guaranteed by the 1st Amendment of the U.S. Constitution and equivalent provisions of the various State Constitutions. This means that our association activities are restricted to the private domain only.

3.We declare the basic right of all of our members to select spokesmen who could be expected to give wisest counsel and advice concerning the need for and availability and access to our products, and to select from those members who are the most skilled to assist and facilitate the actual performance and delivery of products.

4.We proclaim the **freedom to choose and decide for ourselves the types of products, services, and methods that we think are best for healthy eating, preventing illness and disease** of our minds and bodies and for achieving and maintaining optimum wellness. We proclaim and reserve the right to include healthy personal care options that may include healthy food options, but are not limited to, cutting edge discoveries and farming practiced or used by any types of healers or therapists or practitioners the world over whether traditional or nontraditional, conventional or unconventional.

5.More specifically, the mission of our Association is **to provide members with the highest level of personal care options, including oral care,** and the most effective methods of producing said products. We offer members these options. Our Association understands that wellness has many dimensions and strives every day to stay on the leading edge of new technology that leads to better wholesome products. The Association strives and provides healthy product options in the most effective means of delivery of these products at an affordable fee.

The Association will recognize any person (irrespective of race, color, or religion) who is by these principles and policies as a Member and will provide a medium through which its individual members may associate for actuating and bringing to fruition the purposes heretofore declared.

## MEMORANDUM OF UNDERSTANDING

I understand that the fellow members of the Association that provide products and services, do so in the capacity of a fellow member and not in the capacity as a licensed wholesaler, retailer or provider. I further understand that within the association no wholesaler/retailer-customer relationship exists but only a contract member-member Association relationship.

In addition, I have freely chosen to change my legal status as a public consumer/customer to a private member of the Association. I further understand that **it is entirely my own responsibility to consider the recommendations and products offered to me by my fellow members and to educate myself as to the efficacy, risks, and desirability of same and the acceptance of the offered or recommended products** and is my own carefully considered decision.

Any request by me to a fellow member to assist me or provide me with the aforementioned recommendations or products is my own free decision in an exercise of my rights and made by me for the benefit, and I agree to hold the Trustee(s), staff and other worker members and the Association harmless from any unintentional liability for the results of such recommendations and products, except for harm that results from instances of a clear and present danger of substantive evil as determined by the Association, as stated and defined by the United States Supreme Court.

The Trustee and members have chosen Perry Louis Fields, as the person best qualified to perform services to members of the Association and entrust them to select other members to assist them in carrying out that service.

In addition, I understand that, since the Association is protected by the First and Fifth Amendments to the U.S. Constitution, it is outside the jurisdiction and authority of Federal and State Agencies and Authorities concerning any and all complaints or grievances against the Association, any Trustee(s), members or other staff persons. All rights of complaints or grievances will be settled by an Association Committee and will be waived by the member for the benefit of the Association and its members.

Because the privacy and security of membership records maintained within the Association, which have been held to be inviolate by the U.S. Supreme Court, the undersigned member waives complaint process. Any customer/consumer records kept by the association will be strictly protected and only released upon written request of the member. I agree that violation of any waivers in this membership contract will result in a no contest legal proceeding against me. In addition, the Association does not participate in any insurance plans.

**I agree to join the Association, a private-membership association under common law**, whose members seek to help each other achieve better health and live longer with good quality products. I understand that the providers who are fellow members of the Association are offering me products, services and benefits that do not necessarily conform to conventional products on the market. As a member, I accept the goals of helping my body function better and choosing products that are very safe, realizing that no product testing is foolproof. Other aspects of informed consent will take place in my discussions with the providers and my fellow members of the Association.

**My activities within the Association are a private matter that I refuse to share with State Medical Board(s), the FDA, FTC, State Milk Board(s), USDA, Agricultural Board(s) and any other**

**governmental agency without my expressed specific Association permission.** All records and documents remain as property of the Association, even if I receive a copy of them. **I fully agree not to file a liability lawsuit against a fellow member of the Association**, unless that member has exposed me to a clear and present danger of substantive evil. I acknowledge that the members of the Association do not carry liability insurance. The Trustee(s) and the Coordinator shall have the right to sanction a member upon unanimous vote of the Trustee(s), after a hearing of the facts where the member may be present after notification. The sanctions include removal from active membership or imposing any other special and necessary conditions upon any member who shall discredit or bring harm to the Association in any manner.

I enter into this agreement of my own free will or on behalf of my dependent without any pressure or promise of products. **I affirm that I do not represent any State or Federal agency whose purpose is to regulate and approve products.** I have read and understood this document, and my questions have been answered fully to my satisfaction. I understand that I can withdraw from this agreement and terminate my membership in this association at any time. These pages and Article 1 of the articles of association of the Association consist of the entire agreement for my membership in the Association and they supersede any previous agreement.

I understand that the membership fee entitles me to receive those benefits declared by the Trustee(s) and the benefits provided by the online ordering system of [www.fraufowler.com](http://www.fraufowler.com), to be "general benefits" free of further charge. I agree to pay as levied those benefits that I receive that are declared by the Trustees to be "special assessments", per Fee Schedule. I also understand, that all personal information, payment information, intellectual property, images and ordering systems are proprietary of Frau Fowler PMA. The information contained in this document is intended only for the individuals and entities entering into this agreement and any dissemination, distribution or copying is strictly prohibited.

## Membership fee

I will pay the sum of \$1 (non-refundable) an initial joining fee, and a \$1 dollar renewal fee billed automatically on each order. As consideration for my membership contract, said term beginning with the date of the signing of this contract, and by these presents do hereby certify, attest and warrant that I have carefully read the above and foregoing Frau Fowler Contractual Application for Membership, and I fully understand and agree with same.

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Signature

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Printed Name

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Date