



# TETHERSOL AFFILIATE PROGRAM

## OFFICIAL MEMBERSHIP APPLICATION FORM

### SECTION 1: APPLICANT INFORMATION

Please provide the following details. All fields are mandatory unless otherwise specified.

**Full Name:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Primary Solana Wallet Address (for commissions):**  
\_\_\_\_\_

**Phone Number (optional) :** \_\_\_\_\_

**Referral Code (if applicable):** \_\_\_\_\_

### SECTION 2: AGREEMENT & SIGNATURE

By signing this application, I hereby certify that all information provided is true, correct, and complete to the best of my knowledge. I acknowledge that I have read, understood, and agree to be bound by the terms and conditions of the Tethersol Affiliate Program.

**Applicant Signature:**

**Date:**

## SECTION 3: SUBMISSION INSTRUCTIONS

1. **Complete the Form:** Fill out all required fields in Section 1.
2. **Sign the Form:** Provide your signature (digital or handwritten) and the date in Section 2.
3. **Submit via Email:** Scan or save the completed form and email it to the Affiliate Program administration at: [team@tethersum.com](mailto:team@tethersum.com)

*Your application will be reviewed, and you will be notified of your membership status via the email address provided above.*