

Guest Care Card

Name _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____

E-Mail _____

Birthday (Month/Day): _____

How interested are you in the following?

Hosting a cooking or catalog show where you will receive specials and a free shopping spree.	Yes	Maybe	No
--	-----	-------	----

Receiving discounts, earning additional income, and taking advantage of exclusive incentives	Yes	Maybe	No
--	-----	-------	----

If your hostess were starting the business, would you be interested in hosting a party for her?	Yes	No
---	-----	----

Would you rather be contacted via Phone _____ or Email _____?

Wish List

Guest Care Card

Name _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____

E-Mail _____

Birthday (Month/Day): _____

How interested are you in the following?

Hosting a cooking or catalog show where you will receive specials and a free shopping spree.	Yes	Maybe	No
--	-----	-------	----

Receiving discounts, earning additional income, and taking advantage of exclusive incentives	Yes	Maybe	No
--	-----	-------	----

If your hostess were starting the business, would you be interested in hosting a party for her?	Yes	No
---	-----	----

Would you rather be contacted via Phone _____ or Email _____?

Wish List
