

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
