

MARY KAY[®]

Name: _____

Phone: Cell: _____ Home: _____

Do you prefer a phone call or text?

E-Mail: _____

Age: _____ 18-20 21-25 26-29 30's 40's 50's 60's 70's+

Have you tried Mary Kay? No Yes Long Time Ago

If so, do you currently have a Mary Kay Consultant? Yes No

Consultant's Name: _____

Which of the following would be of interest to you:

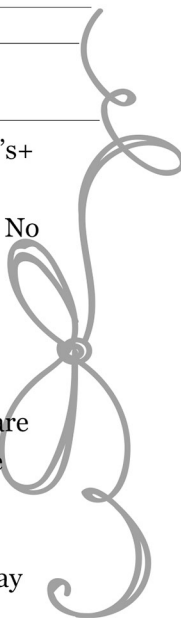
- New Product Test Panel
- Fountain of Youth Age-Fighting Skin Care Clinic
- On-Trend Makeup for the Season & Basic Skin Care
- Hosting a Girl's Day/Night Out Party in my home

I would like more information about:

- Earning some fun money with Mary Kay
- Leadership & Management Position with Mary Kay

Address: _____

City: _____ State: _____



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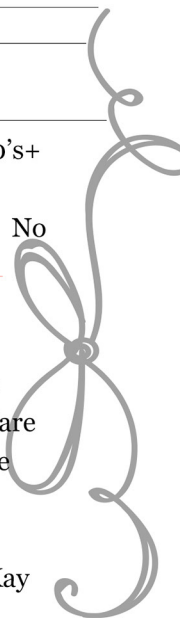
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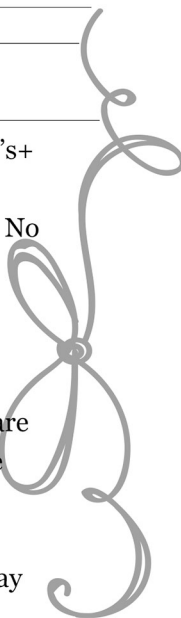
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