Name: Address:	Email:	Name: Address:	Email:
Best Way to Reach me:	City,State,Zip: (circle)home/work/cell	Best Way to Reach me:	City,State,Zip: (circle)home/work/cell
	Skin Care Survey	8	kju Care Survey
. Are you currently using a sk	rin care line? yes no If yes, what:	1. Are you currently using a skin	care line? yes no If yes, what:
2. Are you satisfied with your current skin care line? yes no		2. Are you satisfied with your current skin care line? yes no	
3. What would you like to change about your skin?		3. What would you like to change about your skin?	
4. Have you ever tried Mary Ka	ay? yes no If yes, when:	4. Have you ever tried Mary Kay	yes no If yes, when:
5- Do you currently have a Mary Kay consultant that services you? yes no Her name:		5. Do you currently have a Mary Kay consultant that services you? yes no Her name:	
6. If I were to offer you a free facial would you be willing to try our products and share your opinion? yes no		6. If I were to offer you a free facial would you be willing to try our products and share your opinion? yes no	
Which time of the day is best? morning afternoon evening		Which time of the day is best? morning afternoon evening	
7- Would you prefer your facial to be alone or shared with friends?		7- Would you prefer your facial to be alone or shared with friends?	
full time career opportunitie	hearing about what Mary Kay has to offer in part-time or es? yes no leting this survey. I appreciate your help! Email:	full time career opportunities	earing about what Mary Kay has to offer in part-time or? yes no ting this survey. I appreciate your help! Email:
Address:	City,State,Zip:	Address:	City,State,Zip:
Best Way to Reach me:	(circle)home/work/cell	Best Way to Reach me:	(circle)home/work/cell
	Skih Care Survey	8	kju Care Survey
Are you currently using a sk	rin care line? yes no If yes, what:	1. Are you currently using a skin	care line? yes no If yes, what:
2. Are you satisfied with your current skin care line? yes no		2. Are you satisfied with your current skin care line? yes no	
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Her name:		Her name:	
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Which time of the day is best? morning afternoon evening		Which time of the day is best? morning afternoon evening	
7- Would you prefer your facial to be alone or shared with friends?		7- Would you prefer your facial to be alone or shared with friends?	
3. Would you be interested in hearing about what Mary Kay has to offer in part-time or full time career opportunities? yes no Thank you for completing this survey. I appreciate your help!		8. Would you be interested in hearing about what Mary Kay has to offer in part-time or full time career opportunities? yes no Thank you for completing this survey. I appreciate your help!	