

12 Days of Christmas Gift Collection

Gift Consultant: _____

Phone _____

HOW TO ORDER:

1. Complete information & profile.
2. Choose your collection.
3. Choose payment type.

Your Name: _____
 Work Phone: _____

Her Personal Profile:

- | | | |
|---|---|---|
| 1. Her Eyes Are:
<input type="checkbox"/> Blue
<input type="checkbox"/> Brown
<input type="checkbox"/> Black
<input type="checkbox"/> Hazel/Green | 2. Her Hair Is:
<input type="checkbox"/> Black/Dk Brown
<input type="checkbox"/> Lt Brown
<input type="checkbox"/> Blonde
<input type="checkbox"/> Gray/White | 3. Her Skin Tone Is:
<input type="checkbox"/> Fair (sunburns easily)
<input type="checkbox"/> Medium
<input type="checkbox"/> Dark (tans no burning) |
| 4. She Wears Makeup:
<input type="checkbox"/> Most of the time
<input type="checkbox"/> Sometimes
<input type="checkbox"/> Never
<input type="checkbox"/> Special Occasions | 5. Does She Enjoy Fragrances?
<input type="checkbox"/> YES!
<input type="checkbox"/> Sometimes
<input type="checkbox"/> No
<input type="checkbox"/> Allergies | |

Choose Your Collection:

Gold Silver Platinum

Method of Payment:

Check Cash (50% deposit) MC VISA DISCOVER

Card #: _____ Exp. Date _____

Collection Price \$ _____ Less -- Amount Due \$ _____
(50% Deposit)

Due Date _____

12 Days of Christmas Gift Collection

Gift Consultant: _____ Phone _____

Collection Price	\$ _____	Expect delivery of your Gift Collection on _____.
Less Deposit	-- _____	
Amount Due	\$ _____	
Due Date	_____	

Happy Holidays!!

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