

Name _____ Phone: H _____ W _____

Email: * _____ Birth date: _____ Mo. _____ Day

*This address will not be shared and all mail will be sent as Blind Carbon Copies

Please mail me the great, colored, monthly newsletters

I prefer to receive my newsletter on email

I like being able to use other store coupons toward "like" Shaklee products

Please continue having your occasional *email specials*. I appreciate them.

I like receiving product updates in the *email newsletters*

Only use my email address for emergencies and your email special sales

Please send me a Basic H2 sample.

I would like additional information about:

The Shaklee Difference Children's Health Allergies/asthma

Elevated Cholesterol High Blood Pressure Diabetes

Syndrome X Men's Health Women's Health Heart Health

Cinch Inch Loss Program Get Clean Products- VIVIX

would like information about earning my products FREE

Other _____

I prefer my requested info sent in: hardcopy _____ OR thru email _____

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