



MARY KAY

21 DAY GLOW N TELL

Challenge

Be a part of a nation-wide survey and earn \$21!

Use one of our Skin Care lines for 21 days in a row, fill out a survey, and earn \$21 OFF your Skin Care Collection!

Number and check off the boxes below to track your 21 days of using our skin care! If you miss a day, you must start over! My Skin Care of choice is:



| | | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

GIFT Certificate

This certificate entitles _____

to \$21 OFF the Skin Care Collection of their choice: _____

Consultant: _____

Phone: _____ Expires: _____



MARY KAY

21 DAY GLOW N TELL

Survey



Name: _____ Phone: _____

Address: _____

Email: _____ Best time to reach you: __Day __Evening

| | | | |
|------------------------------|------------|------------|-----------------------|
| Your skin type: (circle one) | Normal/Dry | Combo/Oily | Not sure |
| Age group: (circle one) | 18-25 | 26-35 | 36-45 46-55 56+ |

What other product brands do you use: _____

Have you ever used MARY KAY? (circle one) Yes No

Which Skin Care Line did you use for 21 Days: _____

What did you like best about it: _____

Please rate on a scale of 1-5:

| | | | | | |
|---|---|---|---|---|---|
| Feel of the product: | 1 | 2 | 3 | 4 | 5 |
| Smell: | 1 | 2 | 3 | 4 | 5 |
| How clean your skin felt: | 1 | 2 | 3 | 4 | 5 |
| How moisturized your skin felt: | 1 | 2 | 3 | 4 | 5 |
| Skin tone: | 1 | 2 | 3 | 4 | 5 |
| Skin firmness: | 1 | 2 | 3 | 4 | 5 |
| Skin brightness: | 1 | 2 | 3 | 4 | 5 |
| Makeup adherence after using the product: | 1 | 2 | 3 | 4 | 5 |

Would you recommend this to your friends: (circle one) Yes No

Would you like to continue using this product: (circle one) Yes No

Would buying your product at 50% OFF be a benefit to you? (circle one) Yes No

Would you like to earn it for FREE? (circle one) Yes No

Thank you for your feedback!