



RESERVE YOUR KIT TODAY and PICK UP

Please circle one: ___ May 18th ___ May 19th ___ May 20th ___ May 21st

Contact Name:	
E-mail:	
Address:	
City/State/Zip Code:	
Cell Phone:	

_____ SKIN CARE MANAGEMENT SYSTEM – GWP- LOCATION OFFER

_____ PURCHASE \$150.00 or more and RECEIVE FREE SUNSCREEN \$53.00 value

_____ OTHER _____

Payment Method:

Mastercard ___ Visa ___ American Express ___ Discover ___

Credit Card #		Expiration Date:	
		CSV Code:	

Customer Signature _____ Date: _____

By signing this, you are authorizing us to charge the agreed upon amount on your Event Pick-Up Date.



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