



### Customer Care Card

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Telephone \_\_\_\_\_

E-Mail \_\_\_\_\_

Best time to call:  Day  Evening Time \_\_\_\_\_

I am interested in:

- Monthly Sales & Promotions Catalog.
- Watkins Main Catalog.
- Earning **FREE** Watkins products by hosting a Watkins party.
- Attending a Watkins party.
- The Watkins Home Business Opportunity.

Please contact me to see if I need more Watkins products every:  Month  2 months  6 months  I will contact you

My favorite products: \_\_\_\_\_

I have questions about the following products: \_\_\_\_\_

I would like to know more about:  Watkins Supplements  Watkins All-Natural Cleaners  Watkins Organic Products

WE WILL NOT SELL OR DISTRIBUTE YOUR PERSONAL INFORMATION IN ANY WAY.



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