



JUICE PLUS+®

EXPERIENCE QUESTIONNAIRE

CONTACT INFORMATION:

NAME _____ DATE: _____

STREET ADDRESS _____ CITY _____ ST _____ ZIP _____

BEST WAY TO CONTACT? PHONE TEXT EMAIL _____ FB

Why are you making the decision to take Juice Plus+®?

What are your expectations from taking Juice Plus+®?

Would you like to enhance your Juice Plus+® experience with our 30 Day Jumpstart?

With our CHS Program “kids eat free”! Let’s get the kids involved.

May we add you to our Facebook Support Group? YES NO

You’ll have access to a variety of healthy living tools.

Do you know anyone else that would like to partake in your Juice Plus+® journey? YES NO

We have a Healthy Living Plan (HLP) that allows you to partner with friends & family. Get two more households to do what you’re doing and the company will send you \$100 for helping us Inspire Healthy Living.

How will you know Juice Plus+® is working for you?

Would you be open to doing a survey after 30 days of consuming Juice Plus+®? YES NO

The survey will elevate your awareness of potential benefits. The company also wants to see how Juice Plus+® is working for you. They will send the same survey by email at day 90.

The company will be sending you a series of educational emails to enhance your Juice Plus+® experience.