

Wellness Awareness Questionnaire

Name
Address
Phone Number
Cell phone
Email Address

Please check out the form below and add your comments if any below each question.

Which Documentary did you like best? _____

Did you enjoy the Online Demonstration? Yes ___ NO__ Not Sure__

Do you think your time was well Spent? Yes ___ NO__ Not Sure__

Do you have any current health concerns or conditions? Yes ___ NO__ Not Sure__

If so then what are they?

How much do you currently spend on Natural Health Products per Month?
\$50 or less ___ \$100 or less___ \$200 or less ___ more than \$200__ (How much_____)

How much do you currently spend on water per day?
0 ___ \$2 or less, 5\$ or less___ more than \$5 ___

How much do you currently spend on other beverages such as soda, soft drinks, or other beverages?
0-\$5 ___ \$5-10___ \$10-15___ \$15-20___ More than \$20___ (If so How much _____)

How much do you currently spend on cleaners and disinfectants per month?
0-\$10 ___ \$10-20___ \$20-50___ More than \$50___ (If so How much _____)

Totals spent Monthly on all of the above?

Did you learn anything from the presentation? Yes ___ NO__ Not Sure__

Please write down any Comments on the presentation, the machine, or any other questions on the space below feel free to use the back of the page if you need more space.

Follow up for Interested in Kangen Water Machine

Name

Address

Phone Number

Cell phone

Email Address

Would you like to invest in a machine? Yes ___ NO___ Not Sure___

If so when?

If no or not sure is there anything preventing you from purchasing a machine?

If so what is it?

Would you recommend this machine to a friend?

Would you be interested in having your machine paid for?

Are you interesting in the building a business that helps people get healthier, is good for the environment, and improves the quality of your life and the lives of others?

Would you be interested in forwarding some the emails I sent you so that they can see a Wellness Awareness Presentation?