# CONNECTION RECORD FORM

## Success Habit 2: Focus on Building Relationships

**Source of Contact:** ❑ Referral of _____ ❑ NSA Lead _____ ❑ Other _____

**CONTACT INFORMATION:** Name _____

Daytime Phone _____ Is this ❑ Home? ❑ Work? Alternate #s:_____

Address _____ Employer: _____

City _____ State _____ Zip _____

E-mail _____ Fax _____ Best Way/Time to Reach _____

Spouse? Any children? (Names/ages)_____

Health Concerns/Issues?_____

Primary interest: ❑ Adding more F/V (JP+) ❑ Weight Loss (all products) ❑ Business ❑ Other _____

**JUICE PLUS+® EXPOSURES/INTEREST:** (circle) Caps Chew Gum CRF Com Thins Vin Bus

**____ 60-Second Story**

**Health Audios**

_____ The Whole Truth in 15 Minutes
_____ The Science of Juice Plus+®
_____ An Easy Solution
_____ From Here to Longevity
_____ Call Me in the Morning
_____ In Case of Emergency
_____ Run Faster, Jump Higher
_____ Making a Difference
_____ Surviving to Thriving
_____ Exploding the Diet Myth
_____ Digging Your Grave with Your Fork
_____ Woman to Woman
_____ Nine Simple Steps
_____ The Power Behind Juice Plus+®

**Three-Way Calls**

____ _____
____ _____
____ _____
____ _____

**____ Juice Plus+® 24-Hour Hotline**

**Health Brochures**

_____ Recipe for Better Health
_____ Juice Plus+ Orchard and Garden Blends®
_____ Science of Juice Plus+®
_____ JP+ Gummies®
_____ JP+ Children's Research Foundation®
_____ Guide to Better Health
_____ Juice Plus+ Vineyard Blend®
_____ Research Packet
_____ Prevention+ Newsletter
_____ HLP On-the-Go Book
____ _____
____ _____
____ _____
____ _____
____ _____
____ _____

**Personalized Health Articles**

____ _____
____ _____

**____ Juice Plus+® Website**

**Event Invitations**

____ _____
____ _____
____ _____

**Events Attended**

____ _____
____ _____
____ _____

**Business Audios**

_____ Ron Blue Virtual Franchise CD
_____ Sean and Jennifer Myers Virtual Franchise CD

**Business Brochures**

_____ Part-Time Magic
_____ Virtual Franchise Brochure
_____ Professional Support Program (PSP)
_____ Success Express

**ORDER INFORMATION:** Start Date _____ Billing/Shipping Cycle: ❑ 4I ❑ 2I ❑ Pay-In-Full

_____ Orc and Gar _____Chew _____ Gum _____ Com (Ch – Van – Var) _____ Thins (Ch – AC – Var) _____ Vin

_____ CRF – Child's Name/Birthdate/Product _____ Caps or Chew

**Notes:**

_____
_____
_____
_____
_____

*Other question ideas: circle of influence (activities), stress level, current health habits (e.g., plant-based diet? exercise? drink purified water? take supplements? which ones?) job satisfaction, spouse's occupation, birthday*

| DATE | Follow-up checklist | NOTES |
|---|---|---|
| **Prospect Care** | | |
| | **Call #1**. Ready to order? If not, offer: ☐more time to listen; ☐ info; ☐ three-way call; ☐ event (PPL or WP) | |
| | **Call #2 (if needed)**. Ready to order? If not, offer:_more time to listen; ☐ info; ☐ three-way call; ☐event (PPL or WP) | |
| | **Call #3 (if needed)**. Ready to order? If no, use take-away script on page 7.7/ ☐offer mailing list; ☐other:_____ | |
| | **Place order** at www.nsaonline.com or fax to 901-850-3061 (Include credit card name, number, expiration date and e-mail) | |
| **New Customer Care** | | |
| | Send a follow up piece, such as *Guide* or *Recipe for Better Health Brochure* with the following handwritten note: *"Dear__, Thank you and congratulations for deciding to add more fruits and vegetables to your diet with Juice Plus+®. I'll be staying in touch to help monitor your progress. Best of health,_"* ☐Consider a gift such as an orange or blue pill box, or Acorn | *Suggested Handwritten notes for postcards:* |
| | Address 4 **Follow-up postcards** – ☐Write in mailing dates where the stamp will go (card #1- 7-10 days later, #2-30 days later, #3- 60 days later, #4- 90 days later). ☐File postcards 2, 3, and 4 by month, Jan – Dec. (mail monthly). ☐Include card #1 in current week's mailing. | **#1** You are going to LOVE Juice Plus+®!<br>**#2** Isn't it great to know, Juice Plus+® is hard at work in your body?<br>**#3** What a gift you are giving your body everyday with Juice Plus+®<br>**#4** I trust you will make Juice Plus+® a permanent part of how you take care of your health. Your next box is set to ship on _____. Call me if you need to adjust it. |
| | Add customer to **database** system and **email address book** (spreadsheet, planner, outlook, palm pilot, etc.) | |
| | File this and order form in your **Organizational Binder** (see pg. 8.5) by last name – A-Z tabs | |
| **Continuing Customer Care** *(NSA WILL REMIND YOU)* | | |
| | **Virtual Tracking Customer Call #1** – After10 days of signing up: ☐received shipment? ☐received NSA emails? ☐follow-up from me? ☐taking ok? ☐referrals? | |
| | **Virtual Tracking Customer Call #2** – After 30 days: ☐remembering? ☐spouse taking also? (may need more sooner) ☐Invite to event *(HLP, PPL or listen to 800#, conf call)*; ☐Need another CD/DVD or info on Vineyard/Complete/Thins? | |
| | **Virtual Tracking Customer Call #3** – After 100 days: ☐Ready for 2nd box? ☐Reinforce that staying healthy is a lifetime commitment. ☐Offer new CD ☐Referrals? | |
| | **Next Ship Date:** ___/____/____After 2nd box – Send thank you note (JP+ "Stay Well" card) and consider gift (a second CD, pill box, shaker, etc.) | |

## Ongoing Follow-up Ideas

- Invite to HLPs or Prevention Plus+ lectures.
- Send newsletters or articles every 8-12 weeks.
- Send occasional informational e-mails.
- Check Genealogy Report monthly and call before each box is to be re-shipped.
- Send card on anniversary of Juice Plus+® start date!