

Botanical Effects® Skin Care Survey



Designed by QT Office

Name _____

Preferred Contact Number _____

Email _____

Did you love the feel of the products? _____ 1 2 3 4 5

Did you love the fresh scent? _____ 1 2 3 4 5

Did you find it quick and easy to use? _____ 1 2 3 4 5

How does your skin feel compared to before we started? _____ 1 2 3 4 5

Botanical Effects® Cleansing Gel _____ 1 2 3 4 5

Botanical Effects® Refreshing Toner _____ 1 2 3 4 5

Botanical Effects® Moisturizing Gel _____ 1 2 3 4 5

Of all the products you tried what was your favorite? _____

Would you like to get a few friends together to have a beauty experience of your own to earn free products? _____

If I had a free gift for you, would you be willing to learn more about the Mary Kay® Opportunity? _____

Would you be willing to be a part of another test panel in the future? _____

Thank you for completing the survey!