

Customer Tracker

Name _____
 Phone _____
 Email _____
 Address _____

Enrollment Kit _____
 Oil reference book/app _____

During Lifestyle Overview :

- Take notes as they fill out these sections below in their *Live* guide.
- Use this form to track the Wellness Consult details with new enrollees.

1 LIFESTYLE OVERVIEW

Top Health Priorities for them or their family	90-Day Goals	Solutions They Have or Need
1.		
2.		
3.		

2 DAILY WELLNESS PLAN

Morning	Afternoon	Evening
1.		
2.		
3.		
Daily Wellness Habits <input type="checkbox"/> dōTERRA Lifelong Vitality Pack® <input type="checkbox"/> Frankincense <input type="checkbox"/> DigestZen TerraZyme® <input type="checkbox"/> dōTERRA OnGuard® <input type="checkbox"/> Lemon	<input type="checkbox"/> DigestZen TerraZyme® <input type="checkbox"/> dōTERRA Balance® <input type="checkbox"/> dōTERRA Lifelong Vitality Pack®	<input type="checkbox"/> DigestZen TerraZyme® <input type="checkbox"/> PB Assist+® <input type="checkbox"/> Lavender

3 90 DAY WELLNESS PLAN

Month 1 LRP Date: _____	Month 2 LRP Date: _____	Month 3 LRP Date: _____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
TOTAL PV _____	TOTAL PV _____	TOTAL PV _____

Extend these 3 invitations:

Get a Lifestyle Overview
 Enroll in LRP



Invite to host
 Hosting Overview



Invite to build
 Business Overview
 Launch Overview

