

# COLOR ME Beautiful

## *Business Report Enrollment Form*

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Consultant ID \_\_\_\_\_ Email Address \_\_\_\_\_

Name as appears on Credit Card \_\_\_\_\_

Credit Card Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_

By submitting this form, you agree that Color Me Beautiful will bill the above credit card \$5.00 upon enrollment and \$5 per month on or about the first of every month until cancelled. By subscribing, you will receive a detailed sales report. Reports are issued via email every Friday after 6 pm ET. Please allow 5-7 business days for processing.