

How are we doing?

We GREATLY appreciate your support in providing a testimonial about the value you have received from Summer Waters' services, products, events, classes, or programs. No one does a better job than YOU, the valued client who has benefited directly with your own personal results, of expressing the advantages of working with Summer to others! Thank you for your time and consideration. Please type your responses below or write clearly and return this to Summer as soon as you are able.

1. Please help us let other folks know your results by sharing your testimonial here:

First Name	Last Name	Title/Occupation	City, State
<small>(Name as you would like it to appear.)</small>			

Note: By contributing your testimonial, you are giving Summer Waters permission to utilize it on any promotional material with your name, occupation, city and state, as provided. This will help create the opportunity for your family, friends and other people to be introduced to Summer's work. Thank you for your time and energy!

2. What can we do to improve our service to you?

3. Please share what you like or don't like about our products.

4. Any other helpful comments?

If you have time to help us further....

If you haven't visited in awhile, check out www.SummerWaters.com and be sure to like Summer on Facebook today at www.facebook.com/SavorYourHealth.

Please list or elaborate on any additional comments you believe may help us:

We appreciate your referrals. Do you have a loved one who you think may benefit from Summer's programs, services, products, or the free information Summer provides to the community? Please list their information here:

Name:
Email:
Phone:

Name:
Email:
Phone:

Name:
Email:
Phone:

We thank you and will be sure to let them know you were thinking of them!

It's Been an Honor Working With You,



Summer Waters, LAc, NTP, CGP

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