

# Herbalife Nutrition Shake Party

## Inviting Guests

### Who to Invite?

- Start with your cell phone contact list
- Facebook, Instagram, Snapchat “friends,” list
- COI – friends and family, co-workers if not in the other categories

**\*You need to invite 40, to get 15 to say “yes,” which generally results in 10-12 people who show.**

As you call and email your potential guests, record their responses on the chart. This will aid in follow-up for those that either decline or do not show up after committing.

As you call your potential guests, make sure to offer them to bring a guest with them. The more the merrier!

Print the pages below and record your guest list.

	NAME	PHONE	E-MAIL	ATTENDING?
1				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
2				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
3				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
4				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
5				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
6				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
7				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
8				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
9				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
10				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
11				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
12				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
13				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
14				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
15				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
16				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
17				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
18				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
19				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
20				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
21				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
22				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
23				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
24				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
25				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
26				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
27				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
28				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
29				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
30				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
31				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
32				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
33				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
34				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe

				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
35				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
36				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
37				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
38				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
39				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
40				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
41				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
42				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
43				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
44				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
45				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
46				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
47				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
48				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
49				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe
50				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Maybe