



GEM TASTING ORDER FORM

Gem Tasting Event

Store Name: _____ Phone: _____

Main Contact: _____ Email: _____

Address: _____

Gem Tasting Date Request: _____ Time: _____

Specific Gem Requests:

- | | | |
|-------------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> Amethyst | <input type="checkbox"/> Iolite | <input type="checkbox"/> Spinel |
| <input type="checkbox"/> Aquamarine | <input type="checkbox"/> Morganite | <input type="checkbox"/> Tanzanite |
| <input type="checkbox"/> Citrine | <input type="checkbox"/> Peridot | <input type="checkbox"/> Topaz |
| <input type="checkbox"/> Emerald | <input type="checkbox"/> Ruby | <input type="checkbox"/> Tourmaline |
| <input type="checkbox"/> Garnet | <input type="checkbox"/> Sapphire | <input type="checkbox"/> Zircon |

Carat Size Range Preferred: _____ Price Range Preferred: _____

Gem Tasting Resources

- | | |
|---|--|
| <input type="checkbox"/> Gem Tasting Training Webinar | <input type="checkbox"/> Sample/Example Invitations |
| <input type="checkbox"/> Monthly Planning Emails | <input type="checkbox"/> Advertisements & Marketing Assets |
| <input type="checkbox"/> Gem Tasting How-To Manual | <input type="checkbox"/> Gem Tasting Event Supplies |
| <input type="checkbox"/> Consultation with Staff | <input type="checkbox"/> Gem Tasting Countertop Flip Book |
| <input type="checkbox"/> Selling Colored Gems Webinar | <input type="checkbox"/> Other: _____ |

Please email completed form to Rachel@RogerDery.com or fax to 248-545-3546

For more information, please visit www.gemtasting.com