

Glacken University

Enrollment Form

Your NAME _____ Who is your UPLINE? _____
PHONE _____ E-MAIL _____

ADDRESS _____

Street

City

Zip

I understand the following requirements to attend the course are:

- I have written out my short term and long-term vision on paper.
- I have five affirmations written out on 3 x 5 cards.
- I have a list of 25 names of prospects (and I have begun identifying their potential needs.)
- I have made a commitment to view ALL 7 classes for MY business success.
- I have committed to reading the information in the .pdf binder to further educate myself on the products, compensation and process.

My goal for the next 7 weeks: _____

The cost of the course is \$100. This fee covers the cost of the materials.

This class is a series of recorded webinars with a .pdf binder of materials. Once you are enrolled and paid, you will receive the link to the class recordings and the .pdf.

Jennifer Glacken jennifer@glackenhealth.com

Payment accepted via Paypal go to www.paypal.com & send payment to jennifer@glackenhealth.com; via Venmo find Jennifer-Glacken-1; Zelle look for Jennifer Glacken. Or, mail to: 727 W. Lewiston Ave., Ferndale, MI 48220