

Coastal - New Associates Checklist

Name: _____ What Kind Of Lead: _____ From Where: _____

Email Address: _____ D.O.B. _____

Mailing Address: _____

Home Phone: _____ Time Zone: _____ Best Time _____

Cell Phone: _____ 800# Voice Mail: _____

Date Marketing System Set-Up (website and software): _____ Date Emailed Welcome Letter: _____

Date Removed From Prospect campaign and placed into New Associate campaign: _____

Date Sent Invoice & Receipt: _____ Date Signed Invoice & Receipt Received Back: _____

IM/Screen Name(s): _____

Date Received Goals: _____ Date Received 90-Day Action Game Plan: _____

Date Completed 90-Day Action Plan Training: _____ Date Associate Practiced Script: _____

Leads I Ordered for them: _____
(Date Ordered) (\$ Amount Ordered) (From Where?) (What Ordered)

L1 Package Payment: _____
(Date Paid) (Amount Paid) (How Paid) (Their new Coastal Member ID#)

Shipped Via: _____
(Carrier) (Tracking Number) (Date sent) (Date Signed for)

1st Training Sale: _____
(Date Received) (Name) (Member ID #) (Which Package?)

2nd Training Sale: _____
(Date Received) (Name) (Member ID #) (Which Package?)

Date Sent Level 1 Director's Release To Newly Released Level 1 Director: _____

Level 2 Package Purchased: _____
(Date Paid) (Amount Paid) (How Paid) (Shipped Via) (Tracking Number) (Date shipped)

1st Training Sale: _____
(Date Received) (Name) (Member ID #) (Which Package?)

2nd Training Sale: _____
(Date Received) (Name) (Member ID #) (Which Package?)

Date Sent Level 2 Director's Release To Newly Released Level 2 Director: _____

Level 3 Package Purchased: _____
(Date Paid) (Amount Paid) (How Paid) (Shipped Via) (Tracking Number) (Date shipped)

1st Training Sale: _____
(Date Received) (Name) (Member ID #) (Which Package?)

2nd Training Sale: _____
(Date Received) (Name) (Member ID #) (Which Package?)

Date Sent Level 3 Director's Release To Newly Released Level 3 Director: _____