

**ZONE DIET FORM**

Please do your best to fill out this form as accurately as possible.  
We will notify when the announcement is posted. Please make sure  
you check your spelling.

In completing this zone diet form please fill out complete names  
In Address and locations, please give city state and zip.

Date you want zone diet to come out\_\_\_\_\_

zone diet will not be published until receive a date.

If partners are available please list full names of all partners involved

Full names and address of zone diet \_\_\_\_\_

Partners (include address) \_\_\_\_\_

other partners (include address)\_\_\_\_\_

Are the zone diet partners on the Internet? Yes\_\_\_\_ No\_\_\_\_

If no list the relationship of the zone diet \_\_\_\_\_

Company been in business for how long?\_\_\_\_\_

Partner employed by\_\_\_\_\_

NAME AND DAYTIME NUMBER (WITH AREA CODE) OF A PERSON AVAILABLE TO ANSWER QUESTIONS

\_\_\_\_\_

I certify to the best of my knowledge my information is true.

(Name) \_\_\_\_\_ (Signature) \_\_\_\_\_

mail completed forms to:

ZONE DIET DEPT  
zone diet times  
po box 391  
midland tx 79701