

Dear chiDiet.com Newsletter Subscriber,

Thank-you so much for your willingness to share your story with us!! We want to use your story and photos for the good of people everywhere.

We believe that by sharing stories such as yours, that people who may be suffering from obesity, diabetes, cancer, fibromyalgia or **any** ailment or health challenge, could find hope in knowing that they can learn to take control of their own health by making better choices in what they eat. Specifically, by learning about how to put the raw and living foods eating program into practice in their own lives.

Here are the **3** items that we need from you:

- 1) Fill out the attached "Survey" completely.
- 2) Send BEFORE & AFTER photos of yourself placed on the "Photo Suggestion Sheet."
(Send the Very Best BEFORE & AFTER photo that you have to show your results.)
- 3) Fill out and sign the "Model Release Form"
(So we have your permission to use your photographs & story.)
- 4) **OPTIONAL:** If you are able, send us a regular video tape or digital video of yourself, telling your complete story on film. We're offering a BONUS Gift if you are able to send this, too!! We'll call you with details after we receive it. Much thanks.

And now for the best part ... **Our GIFT TO YOU:**

For your willingness to send us ALL 3 of the above listed items, we want to send you a FREE DVD-R or VHS as our special gift. Within 2 weeks of receiving the 3 items listed, we will contact you to see which of our 50 different videos (a \$25 dollar value) you would be interested in having for FREE, and we'll mail it to you right away, as our way of saying THANKS.

You can MAIL your completed package to:

Dr. Jim Carey, PhD
5678 W. Old Savannah Rd.
PO Box 321
Midville, GA 30441

We'd prefer that you mail your completed package to us, but if you prefer to scan your photos and email the forms as attachments, you can email them to: DrJimCarey@chiDiet.com.

If you know someone who has a great Raw and Living Foods Story to tell, that perhaps does not receive our newsletter, please, make copies of this information and share it with them as we'd love to have their story too. Or, if you belong to a Raw Living Group, make copies for everyone! And Yes, they each would receive a FREE DVD or VHS from our collection... Their choice!!

Most Sincerely,

Dr. James E. Carey, PhD

P.S. If you have any questions, feel free to contact me toll-free at (877) 213-4699, or at (478) 982-3462 or email DrJimCarey@chiDiet.com.

SURVEY

Testimonials for ChiDiet.com

Name: _____

Address, City, State, ZIP, Country:

Email Address: _____

Phone Number: _____

Do you have a good **BEFORE** and **AFTER** Photograph of yourself that you would be willing to mail or email to us? _____ Yes _____ No

How did you find out about the **Raw/Living Foods Diet and Lifestyle**?

Did you **attend** any special classes, read a book, or visit a Center as part of your learning?

How long have you been on a Raw/Living Foods Diet?

Did you have any particular **Ailments or Health Challenges** before you started the Program?

If you had an Ailment or Health Challenge, **what percentage** of Raw/Living Foods did you eat, and for how long: (example – 80% Raw & 20% Cooked for 2 years)?

Do you **continue** to enjoy the Raw/Living Foods Diet now? _____

Has there ever been a period of time in your life that you were 95 – 100% Raw/Living?
_____ Yes _____ No

If yes, then for how long? _____

Did the Raw/Living Foods Diet have **any positive effects** on any or all of your Ailments or Health Challenges?

Was **weight loss** a hopeful part of your choice to try Raw/Living Foods?
_____ Yes _____ No

If it was, were you successful and **how much weight** did you lose?

How long did it take you to lose that amount of weight?

**** IMPORTANT ...** Feel free to use a **separate sheet of paper** to give us any more details, or to tell us your **complete story**, which by the way, we would love to hear!!

THANK-YOU so much for sharing your Raw/Living Foods story with us!!

If you are willing to go just one step further, and fill out and sign the attached “MODEL RELEASE FORM”, so we can use your photo and basic story information in our newsletter and to share with others at speaking engagements or events, etc., then we will send you a **FREE VIDEO, of your choice, from our collection** at our website: www.ChiDiet.com/tapes.htm.

You'll need to return

1) Survey

2) BEFORE & AFTER Photographs

3) Model Release Form to us via either of the following methods:

*** by mail to:**

ChiDiet.com / Dr. Jim Carey
5678 W. Old Savannah Rd.
P.O. Box 321
Midville, GA 30441

*** by email to:** DrJimCarey@ChiDiet.com

(If you are mailing your photographs and need them returned to you, we will be glad to mail them back to you within 2 weeks of receipt.)

If you have **any questions**, feel free to contact **Dr. Carey toll free** at: (877) 213-4699 or (478) 982-3462 or JimCarey@ChiDiet.com

Photo Suggestion Sheet

BEFORE and AFTER

Name of subject(s) in photos:

There are several things to consider when choosing the photos you will send:

- 1 Look at the photos for “clarity.” Make sure they are not blurry or out of focus.
- 2 Make sure your NAME is clearly written on the back of each photo.
- 3 If possible, let the photos be “full body” or at least “3/4 body” shots.
- 4 If you have a choice, 35 mm photos are usually better.
- 5 If you would like to send 3 or 4 photos, that would be great, as we could use several photos as we put together your story. Possibly an “up close” photo of you before and after would be good choices.
- 6 If you need to have these photos returned to you, we would be glad to mail them back within 2 weeks of receipt. Please list the address you would like them returned to here:

MODEL RELEASE

In exchange for consideration received, I hereby give permission to James Carey, Creative Health Institute and chiDiet.com to use my name and photographic likeness in all forms and media for print, advertising, trade, and any other lawful purposes.

Print Name:

Signature:

Date:

If Model is under 18: I, _____, am the parent / legal guardian of the individual named above, I have read this release and approve of its terms.

Print Name:

Signature:

Date:

Our GIFT TO YOU!

For your willingness to allow us to use your photos and story in our newsletter, on our website and to share with others at speaking engagements or events, etc., we would like to send you a FREE DVD-R or VHS, of YOUR choice, from our collection at www.chiDiet.com/tapes.htm. Once we receive everything from you via mail, we will contact you within two weeks to find out which video you would like us to send you! *(Note: if you send us a recording of yourself telling your story on film, you'll be receiving an additional bonus!)*

When you printed out this document you should have found 5 items totaling 7 pages:

- 1 A "Cover Letter" addressed to " chiDiet Newsletter Subscriber," describing the details of survey submission.
- 2 A copy of the "Survey," three pages.
- 3 A "Photo Suggestion Sheet," for Before and After.
- 4 A "Model Release Form."
- 5 This page, "Our Gift to You."

Please put all of these together in an envelope and mail to:

Dr. Jim Carey, PhD
5678 W. Old Savannah Rd.
PO Box 321
Midville, GA 30441

We will be anxiously awaiting your story and photos ... Thank You again!