

Health Status Survey for Children

We welcome you and your child to the Flavon max Consumer Club! By completing this questionnaire you make it possible for us to carry out further investigations regarding the suitability of Flavon kids for the sake of our consumers' greatest possible satisfaction.

For this, we need to know our consumers' experiences as extensively as possible. Thank you a lot in advance for sparing your time to complete this questionnaire.

(The Flavon Group Kft. shall store your data confidentially and shall not pass it over to any third party.)

Out of those who complete this questionnaire and send it back to us, Flavon Group Kft. will select by draw of lots one Club Member in June and December each year, **who will receive a free carton of Flavon kids®.**

Please fill in this questionnaire only after your child has been consuming Flavon kids for at least 30 days without break. Regular consumption is required for attaining satisfactory effects!

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| Do you consider your family's fruit and vegetable consumption satisfactory? | Yes - No |
| Do you consider it important to teach health awareness as early as childhood? | Yes - No |
| Do you consider it important to teach prevention via healthy diet as early as childhood? | Yes - No |
| Has the quality of the product met your expectations? | Yes - No |
| Do you consider the ingredients of the product to be of great value? | Yes - No |
| Does your child consume the product with pleasure? | Yes - No |
| Has the consumption of the product influenced your child's appetite? | Yes - No |
| Has your child's weight changed while consuming the product? | gained weight - lost weight - no change |

What changes in your child's health have you experienced since s/he started consuming our product?

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Do you consent to our making use of your opinion in the future? Yes - No

Starting date of consumption:.....

How long has s/he been consuming the product:.....

Number of jars of product consumed:.....

Age:.....

Name:.....

Address:.....

Please send the form filled in and signed to the following address by post, fax or email:
Flavon Group Kft. H-4033 Debrecen, Veres Péter u. 19., HUNGARY; Fax: +36-52-520-521
e-mail: info@flavongroup.com **web:** www.flavonmax.com