

Dr. Erich's Practice Wealth
V.I.P. Private Mentorship Program

CONFIDENTIAL APPLICATION



**FAX COMPLETED APPLICATION TO (877) 808-6046
to see if you are eligible for the 15-min. Private Phone
Consultation with Dr. Erich.**

Name: _____ Spouse Name: _____

Business Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Optional - Home Address: _____

Business Phone: _____ Home Phone: _____

Cell Phone: _____ Fax: _____

Birth date: _____ Years in Current Practice: _____

Email: _____

**Please rank each of the following marketing-oriented items according to the difficulty or challenge they currently represent to you; rank EACH ONE on a 1 - 5 scale:
1 = insignificant to 5 = very significant.**

ALSO, number the eight most important items to you 1 thru 8. 1 = most important of all.

<u>No.</u>	<u>Ranking</u>
_____ Advertising effectively	1 2 3 4 5
_____ Generating sufficient QUANTITY of patients	1 2 3 4 5
_____ Controlling costs of advertising, patient acquisition	1 2 3 4 5
_____ Patient retention	1 2 3 4 5
_____ Stimulating repeat business from patients	1 2 3 4 5
_____ Stimulating referrals from patients	1 2 3 4 5
_____ Clarifying my USP, Positioning, Marketing Messages	1 2 3 4 5
_____ Taking advantage of new opportunities, technologies	1 2 3 4 5

Please rank each of the following financial-oriented items according to the difficulty or challenge they currently represent to you; rank EACH ONE on a 1-5 scale: 1 = insignificant to 5 = very significant. ALSO, number the six most important items to you 1 thru 6, 1 = most important of all.

<u>No.</u>		<u>Ranking</u>				
_____	Finding time to implement	1	2	3	4	5
_____	Getting employees and/or associates "on board"	1	2	3	4	5
_____	Hiring/training/managing employees	1	2	3	4	5
_____	Setting, selling and commanding premium fees	1	2	3	4	5
_____	Taking a satisfactory amount of time off	1	2	3	4	5
_____	Having a long-term retirement/exit strategy	1	2	3	4	5

<u>DO YOU REGULARLY OR FREQUENTLY USE:</u>	<u>YES</u>	<u>NO</u>
Direct Mail	<input type="checkbox"/>	<input type="checkbox"/>
Broadcast VOICE	<input type="checkbox"/>	<input type="checkbox"/>
Web Site	<input type="checkbox"/>	<input type="checkbox"/>
E-Mail	<input type="checkbox"/>	<input type="checkbox"/>
Print Media Advertising, Local	<input type="checkbox"/>	<input type="checkbox"/>
Radio/TV Advertising, Local	<input type="checkbox"/>	<input type="checkbox"/>
Publicity/News Releases, Local	<input type="checkbox"/>	<input type="checkbox"/>
Newsletter	<input type="checkbox"/>	<input type="checkbox"/>
Personal Networking	<input type="checkbox"/>	<input type="checkbox"/>
Tele-Marketing	<input type="checkbox"/>	<input type="checkbox"/>

HOW MANY MARKETING STRATEGIES OR SYSTEMS DO YOU HAVE IN PLACE THAT CONSISTENTLY GENERATES NEW PATIENTS FOR YOU? _____

HOW MANY MARKETING STRATEGIES OR SYSTEMS DO YOU HAVE IN PLACE THAT CONSISTENTLY STIMULATE REPEAT BUSINESS, LOCK IN CONTINUING OR RENEWABLE INCOME AND/OR STIMULATE REFERRALS? _____

BRIEFLY DESCRIBE CURRENT PRACTICE (AND ATTACH ONE BROCHURE, SALES LETTER, WEBSITE, OR OTHER DOCUMENT REPRESENTATIVE OF YOUR PRACTICE).

DESCRIBE 3 MAJOR GOALS YOU ARE WORKING TOWARD:

#1: _____
#2: _____
#3: _____

DESCRIBE 3 MAJOR SOURCES OF STRESS, FRUSTRATION OR UNHAPPINESS THAT INTERFERE WITH YOUR PRODUCTIVITY AND ROB YOU OF PEACE OF MIND:

#1: _____
#2: _____
#3: _____

YOUR OFFICE

Type of office (home, store front, office blg) _____

Square Feet: _____

Office hours: _____

Number of hours you work, average week: _____

Number of hours you'd prefer to work, average week: _____

% of work-time you rank as productive: _____

No. of hours per week you work "on" vs. "in" your business _____

No. of weeks of vacation taken: 2020: _____ 2021: _____ 2022: _____

No. of weeks of vacation you'd prefer taking: _____

Actual Collections in the last 3 years - 2020: _____ 2021: _____ 2022: _____

READINESS ASSESSMENT

RANK YOURSELF IN MARKETING EXPERIENCE: (Mark one)

- _____ Very knowledgeable; serious student; very active in using strategies
- _____ Very knowledgeable; serious student; but not very active in implementing
- _____ Somewhat knowledgeable; actively implementing
- _____ Somewhat knowledgeable; but not very active in implementing
- _____ A relative novice

WHY DO YOU WANT TO PARTICIPATE IN THIS VIP PRIVATE MENTORSHIP PROGRAM? AND, WHAT DO YOU WANT TO GET OUT OF THIS PROGRAM?

Dr. Erich's Practice Wealth

VIP Private Mentorship Program Benefits

Included:

- Monthly 'one-on-one' pre scheduled personal coaching call with Dr. Erich (\$4,800 Value)
- 24 Hour Direct Access to Dr. Erich's by personal e-mail and personal phone. (Value undeterminable)
- Registrations for Bootcamp (or other seminars when available) for primary doctor and spouse (\$2,997 Value)
- Includes all Practice Wealth Gold Membership Benefits (Value \$9,528)
- WL Club Benefits FREE for active West Coast buyers (*must have the Weight Loss Marketing kit*)
- CA training calls with Dr. Erich. He trains your CAs (Value \$4,800)
- Mystery shopping calls to your office by my staff (Value \$697)
- Automatic access to all Teleseminars...(Value \$1,000)
- Access to the most recent group telecoaching calls (\$ 997 Value)
- FREE copy of Dr. Erich's Live One-Day Training Seminar DVD's (Value \$997)
- Advanced Opportunities to get "first crack" and "discounts" for All New Practice Wealth Products & Services.
- Private personal In-House consultation (if requested, only \$2,000, regular fee \$12,900). Personal In-House consults are only available to VIP members.
- Digital thumb-drive of Dr. Erich's entire Practice Wealth System (\$8,000 Value)
- Access to Dr. Erich's Million Dollar Rolodex for vendors and contacts
- 20% off all Toolbox products (not including other vendors, with some exceptions)
- Once a quarter special gift is sent to you specially selected by Dr. Erich
- 10% DISCOUNT Savings on West Coast Anti Aging orders over \$200 (*for limited time*)
- Audio Recordings of previous VIP Group meeting sessions (not for sale)
- **Total Value: Well over \$ 58,000.00**
- Limited to exclusive small group, you must qualify and by invitation only!

Membership Criteria:

- Be willing to share, during the meetings, your successes, victories, failures, frustrations and problems, so everyone in attendance prospers.
- Be willing to present your greatest successes
- Have an honest desire to grow your practice to 'at least' \$ 1,000,000.00 gross or more
- Maintain confidentiality of all sensitive information discussed
- Minimum 24 month commitment
- Must qualify and by invitation only

Dr. Erich's Practice Wealth ~ Phone & Fax (877) 808-6046