

STRICTLY CONFIDENTIAL

FOR OFFICE USE ONLY

MEMBERSHIP NO

Personal Questionnaire

(Block Letters Please)

Surname (Mr/Mrs/Miss/Ms) First Name(s)

Address

Postcode Tel. No: Code Number

I am Single Widowed Divorced Separated

Age Height Weight Build Nationality

Colour of Eyes Hair Skin Do you smoke? Yes No

Occupation (please specify)

Education Religion

I have children, aged Do they live with you? Yes No

How would you describe yourself? (cheerful, reliable, quiet, confident, polite, ambitious, loyal, creative, gentle, easy-going, calm, romantic, affectionate, extrovert, tolerant, energetic, refined, sympathetic, generous, kind, impulsive, witty, shy, practical, adventurous, etc.)

INTERESTS (Please tick)

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Aerobics/Keep fit | <input type="checkbox"/> Crafts | <input type="checkbox"/> Jogging | <input type="checkbox"/> Squash/Tennis |
| <input type="checkbox"/> Animals/Pets | <input type="checkbox"/> Crosswords/Competitions | <input type="checkbox"/> Karaoke | <input type="checkbox"/> Socialising |
| <input type="checkbox"/> Antiques | <input type="checkbox"/> Current Affairs | <input type="checkbox"/> Languages | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Architecture | <input type="checkbox"/> Cycling | <input type="checkbox"/> Motoring | <input type="checkbox"/> Ten-pin Bowling |
| <input type="checkbox"/> Art | <input type="checkbox"/> Dancing | <input type="checkbox"/> Pop/Folk/Classical Music | <input type="checkbox"/> Theatre |
| <input type="checkbox"/> Astrology | <input type="checkbox"/> Dining Out | <input type="checkbox"/> Home Entertaining | <input type="checkbox"/> Travel |
| <input type="checkbox"/> Badminton | <input type="checkbox"/> D.I.Y. | <input type="checkbox"/> Needlework | <input type="checkbox"/> T.V./Video |
| <input type="checkbox"/> Bingo | <input type="checkbox"/> Environment/Ecology | <input type="checkbox"/> Nightclubs | <input type="checkbox"/> Voluntary Work |
| <input type="checkbox"/> Bowls | <input type="checkbox"/> Fashion | <input type="checkbox"/> Opera/Ballet | <input type="checkbox"/> Walking/Rambling |
| <input type="checkbox"/> Camping | <input type="checkbox"/> Finance/Stock Market | <input type="checkbox"/> Parties | <input type="checkbox"/> Weekends Away |
| <input type="checkbox"/> Caravanning | <input type="checkbox"/> Fishing | <input type="checkbox"/> Photography | <input type="checkbox"/> Wine/Winemaking |
| <input type="checkbox"/> Chess/Cards | <input type="checkbox"/> Flying | <input type="checkbox"/> Politics | <input type="checkbox"/> Writing |
| <input type="checkbox"/> Cinema | <input type="checkbox"/> Gardening | <input type="checkbox"/> Pubs | Other (please specify) |
| <input type="checkbox"/> Computers | <input type="checkbox"/> Golf | <input type="checkbox"/> Radio | |
| <input type="checkbox"/> Concerts | <input type="checkbox"/> History | <input type="checkbox"/> Reading | |
| <input type="checkbox"/> Conversation | <input type="checkbox"/> Holidays Abroad | <input type="checkbox"/> Sailing | |
| <input type="checkbox"/> Cookery | <input type="checkbox"/> Horseriding | <input type="checkbox"/> Skiing | |
| <input type="checkbox"/> Countryside | <input type="checkbox"/> Jazz | <input type="checkbox"/> Sports | |

Do you own any of the following? House Flat Bungalow Car Boat/Yacht

Motorcycle Pets

Are you a regular reader of a newspaper/magazine? Which one(s)?

Is there any other information about yourself which would be helpful to me?

Please Tick Accordingly

I wish my name and telephone number to be submitted to other members on your lists. Yes No

I wish to use only my membership number on your lists. Yes No

I wish my telephone number to be given to individual members specifically selected for me by Jane Stephens. Yes No

If you would like to enclose a recent photograph, this will be of considerable help to me in selecting personal introductions for you. Thank you.

Details of your preferred personal introductions:

Age..... Height..... Nationality.....
 Do you object to children?.....
 Other details you consider important.....
 Please tell me who recommended you or where you saw my advertisement.....
 Please let me know if you have been a member before.....

CONDITIONS OF MEMBERSHIP

1. The purpose of the Jane Stephens' Introduction Bureau is to introduce members to each other with a view to friendship.
2. All members must be over 18 years of age.
3. Membership commences from date of registration and is not transferable.
4. Fees to the Bureau can not be refunded.
5. The Bureau reserves the right to refuse application for membership without assigning a reason and to cancel the membership of a member improperly using the service.
6. While every effort is made to accept only genuine applications, the Bureau cannot guarantee the accuracy of details provided by members, nor can it be held responsible for the result of any introduction. The particulars provided should be verified by the individual member.
7. Details of other members must not be passed to a third party.
8. Members may pay their membership fee by credit/debit card, postal order or cheque made payable to Jane Stephens. Cash should be sent in a registered envelope. To facilitate enrolment a cheque card number should accompany any cheque.

DECLARATION

The information submitted herein is accurate to the best of my knowledge. I have read and agree to the conditions of membership.
 I wish to enrol with Jane Stephens' Introduction Bureau and I enclose my membership fee of £

Signed.....Date.....

<p><i>For office use only</i> Introductions</p>	<p>Matchperfect Introductions</p>	
<p><i>For office use only</i></p>	<p>D</p>	<p>No.</p>