

# CLASSIC CONNE~~X~~IIONS - APPLICATION FORM

**Please complete in full**

SURNAME .....  
Mr/Mrs/Ms/Miss

FIRST NAME: ..... NATIONALITY: .....

ADDRESS: .....

..... POST CODE: .....

TEL NUMBER (HOME INCLUDING DIALLING CODE): .....

MOBILE: ..... PREFERRED CONTACT NUMBER.....

EMAIL ADDRESS: .....

HEIGHT: ..... HAIR COLOUR AND LENGTH: .....

I AM IN MY: 20's 30's 40's 50's 60's 70+ (PLEASE CIRCLE)

MARITAL STATUS (DIVORCED, SINGLE, WIDOWED, SEPERATED) PLEASE CIRCLE

DO YOU HAVE DEPENDENT CHILDREN? YES/NO DO THEY LIVE WITH YOU? YES/NO

OCCUPATION: .....

EDUCATION/PROFESSIONAL QUALIFICATIONS: .....

DO YOU DRIVE? YES/NO

DO YOU SMOKE? YES/NO

**THIS SECTION IS VERY IMPORTANT AS OUR LIST IS COMPILED ON THE INFORMATION YOU GIVE BELOW.**

PLEASE TELL US ABOUT YOURSELF and YOUR HOBBIES AND INTRESTS, try and be as detailed as possible by naming the type of sport you like, the type of music, which books/films, travel – recent holidays, not forgetting what you do in your leisure time.

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**DESCRIBE YOUR CHARACTER/PERSONALITY E.G RELIABLE, FUN LOVING, GOOD SENSE OF HUMOUR ETC.**

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**(PLEASE CONTINUE ON A SEPERATE SHEET IF REQUIRED)**

**PLEASE TELL US ABOUT THE TYPE OF PERSON YOU WOULD LIKE TO MEET**

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**CONDITIONS OF MEMBERSHIP/DISCLAIMER**

1. NO DETAILS OF CLIENTS HAVE BEEN VERIFIED, THE TEAM AT CLASSIC CONNE<sup>X</sup>IONS CANNOT GUARANTEE, AND TAKE NO RESPONSIBILITY FOR THE ACCURACY OF DETAILS PROVIDED.
2. WE STRONGLY RECOMMEND THAT MEMBERS TAKE RELEVANT STEPS TO VERIFY AND FEEL COMFORTABLE WITH A PERSON BEFORE GIVING OUT ADDRESSES, SURNAMES ETC.
3. MANAGEMENT RESERVE THE RIGHT TO CANCEL MEMBERSHIP AT ANY TIME, WITHOUT REFUNDING ANY FEES PAID
4. ALL CONSULTANTS ARE REGISTERED UNDER THE DATA PROTECTION ACT 1998
5. PERSONAL DETAILS OF OUR CLIENTS ARE NOT DISCLOSED TO ANY OTHER ORGANISATION

**DECLARATION**

**THE INFORMATION SUBMITTED IS TRUE AND CORRECT**

**I AM OVER 21 YEARS OF AGE AND I AM SINGLE, DIVORCED, SEPERATED or WIDOWED**

**I ENCLOSE A CHEQUE OR POSTAL ORDER FOR THE AMOUNT OF £99 (Ninety nine Pounds), MADE PAYABLE TO CLASSIC CONNEXIONS**

**OR FOR CREDIT OR DEBIT CARD PAYMENTS COMPLETE THE DETAILS BELOW**

<b>CARD TYPE:</b> ..... <b>16 DIGIT CARD NUMBER:</b> ..... <b>SECURITY NUMBER (LAST 3 DIGITS ON BACK OF CARD):</b> ..... <b>EXPIRY DATE:</b> ..... <b>VALID FROM DATE OR ISSUE NUMBER:</b> ..... <b>NAME AS IT APPEARS ON CARD:</b> .....
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**SIGNED:**.....**DATE:**.....

**RETURN TO: Your nearest CLASSIC CONNE<sup>X</sup>IONS office at -**  
**PO BOX 6890 WEYMOUTH DORSET DT4 4DY**  
**PO BOX 73 CREWKERNE SOMERSET TA18 9AT**  
**PO BOX 253 BRIDGEND MID GLAM CF31 9FN**  
**PO BOX 556 WINCHESTER HANTS SO23 3FU**  
**PO BOX 730 HAYWARDS HEATH RH16 9FN**