



Concerned Singles

MEMBERSHIP FORM

NAME _____ LAST NAME _____

EMAIL _____

ADDRESS _____

CITY _____ STATE/PROVINCE _____ ZIP/POSTAL CODE _____ COUNTRY _____

PHONE _____ PHONE 2 _____ CELL PHONE _____

- Please activate my new membership: \$129
- Please renew my membership: \$94
- My check or money order is made payable to Concerned Singles.
- Charge my Visa / MasterCard / Discover/Novus / Amex/Optima

CREDIT CARD NUMBER _____ EXPIRY DATE _____ CVV CODE _____

OFFICE USE
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- I am a Man seeking a Woman
- I am a Woman seeking a Man

If you like, please tell us how you learned about Concerned Singles.

- Word of mouth
- Web search
- Publicity
- Advertising
- Other _____

ENTER YOUR PROFILE IN THE BOX BELOW

Keep your profile to 60 words or fewer. Less is more.

Use the back of this form if you need more space or to print your listing.

Contact Option: Email or Postal / Email Only / Postal Only

Membership Terms

I understand that contacts between members are entered upon voluntarily, on the basis of information the members themselves have provided. I understand that not every member will meet my personal requirements for a relationship. I understand that Concerned Singles is not an agent for any of its members, makes no

guarantees, and has no liability beyond the amount I pay for its services.

I certify that the information I have given above is accurate. I certify that I am unattached and that I respect the rights of others.

I have read and agree to the membership terms at left.

SIGNATURE DATE

Please mail your completed form and payment to Concerned Singles, Box 444, Lenox Dale, MA 01242