

NEXUS INTERNATIONAL

MEMBERSHIP APPLICATION FORM

Website: www.nexus-uk.co.uk

We hereby apply to be accepted as members of NEXUS INTERNATIONAL

PLEASE PRINT THROUGHOUT

FULL NAME 1:	FULL NAME 2:
FULL ADDRESS:	HOME TEL. NO.: (INCLUDE AREA CODE)
	MOBILE: NO. 1: NO. 2:
	HOME EMAIL ADDRESS:

How would you like to receive the Nexcommunicator:	Post.....	Email.....	Please tick one
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The information above is true, we undertake to hold all information supplied by Nexus International in complete confidence at all times. We affirm that the function of Nexus International is the provision of information given to it by its members to facilitate communication, and we give our permission for information supplied above (name, area, telephone numbers & email address) to be circulated to other members and posted on the Internet using relevant security measures. We clearly understand that Nexus International offers members the means to create a better life by communicating and meeting socially, and that it is not responsible for any occurrence as a consequence of any meeting with, or friendship formed, as a result of membership. We apply to be accepted for membership on this basis.

SIGNATURE 1:	DATE:	SIGNATURE 2:	DATE:
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How did you find out about Nexus International?
(If through a newspaper or magazine, it would help if you could give us the name)

If through Nexus members, who?
(Names, membership no. and area if possible)

ANNUAL SUBSCRIPTION (Inc. V.A.T) PER COUPLE	£70.00	75 Euros	
HALF-YEARLY SUBSCRIPTION (Inc. V.A.T) PER COUPLE	£40.00	45 Euros	

A
Please tick one
B

Please make all cheques payable to NEXUS INTERNATIONAL. Allow at least 14 days for your application to be processed.

NEXUS INTERNATIONAL ACCEPT THE FOLLOWING METHODS OF PAYMENT BY LETTER POST OR FAX: CHEQUES: EURO CHEQUE / UK CHEQUE / UK POSTAL ORDER CREDIT CARDS: AMEX / DELTA / ELECTRON / JCB / MAESTRO / MASTERCARD / SOLO / UK MAESTRO / VISA - Please debit my account No.: _____ Issue No. (If applicable): _____ Expiry Date: _____ Valid From Date: _____ Security Code (last 3 digits on back of card): _____ Signature: _____ Date: _____ PLEASE NOTE FOR YOUR SECURITY THAT WE DO NOT ACCEPT CREDIT CARD DETAILS VIA EMAIL

PLEASE RETURN THIS FORM AND PAYMENT TO:
NEXUS INTERNATIONAL, Nexus Head Office, 6 The Quay, Bideford, N. Devon, EX39 2HW, England. Tel/Fax: 0044 (0)1237 429786

OFFICE USE ONLY: Recd. at () on Recd. _____ Checked _____ WEBSITE

NEXUS INTERNATIONAL

MAIL & MEMBERSHIP DEPT.

Nexus Head Office, 6 The Quay, Bideford, N. Devon, EX39 2HW, England.

Tel / Fax: 0044 (0)1237 429786

www.nexus-uk.co.uk

Please complete and return this form along with your application / renewal form to enable us to print and circulate your details on the Nexcommunicator.

FOLIO ENTRY FORM

We give permission for all details we have entered beyond the dotted line to be printed and distributed to other NEXUS members (in the UK and abroad) and posted on the Internet using relevant security measures.

Full names:.....

Full address:.....

Signed:..... Date:.....

Signed:..... Date:.....

(To enable us to print your information we do require **both** members to sign and date above)



PLEASE COMPLETE ALL SECTIONS IN BLOCK CAPITALS

First names:.....

Home telephone number:..... Area:.....

Mobile telephone number(s):.....

Home email address:.....

Membership Number:..... Expiry Date:.....

This section is for you to write a short story about yourselves. Perhaps your likes & interests, plans for the future, what your area is noted for and anywhere you could personally recommend staying should members visit your country:

Please continue on reverse if necessary...

We give our permission for all details we have entered beyond the dotted line to be printed and distributed to other NEXUS members (in the UK and abroad) and posted on the Internet using relevant security measures.

Signed:..... Date:.....

Signed:..... Date:.....

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Folio entry continued: