# New Customer Form

## Customer Information

1. **Customer Name:**
   * First Name:
   * Last Name:
2. **Contact Information:**
   * Phone Number:
   * Email Address:
3. **Address:**
   * Street Address:
   * City:
   * State/Province:
   * ZIP/Postal Code:
   * Country:
4. **Preferences:** (Optional, based on your business needs)
   * Preferred Contact Method: ☐ Email ☐ Phone ☐ Text
5. **Account Details:** (If applicable)
   * Username:
   * Password: (Prompt to create a password, but ensure this is handled securely)
6. **Additional Information:**
   * How did you hear about us?
   * Areas of Interest: (List options relevant to your services or products)

## **Consent and Agreement**

(Customize based on legal requirements)

* Privacy Policy Agreement: ☐ I agree to the Privacy Policy.
* Marketing Communications: ☐ I wish to receive newsletters, marketing, and promotional materials.

## Signature and Date

* Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_