# 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_