

#### REGISTRATION FORM

PLEASE PRINT LEGIBLY

π	TO ENHANCE QUALITY OF LIFE DATE / /					
	INFORMATION COMPLETED. SIGNATE, BUT IS NOT REQUI	PAGE 2 IS OPTIONAL				
FIRST NAME	LAST NAME					
ADDRESS (PO Box #)	(PHYSICAL)					
CITY	STATE	ZIP				
LANDLINE PHONE ()	none CELL PHO	NE () 🗆 none				
GENDER ☐ male ☐ female	BIRTHDATE/	/				
RESIDENCE  single-f	amily home	do 🗌 facility 🔲 RV / mobile				
☐ other - please describe						
EMAILI prefer contact companion	(so we may send you	I prefer contact companion enjoy contact with me daily during the following periods:				
call me on my   land-line	gender $\square$ male	7am - 11am ☐ mornings				
☐ cell phone	☐ female	<b>11am - 2pm</b> □ mid-day				
and  live in my area	and $\Box$ close to my age	2pm - 6pm  afternoons				
☐ need not live locally	any age. I don't care.	6pm - 10pm ☐ evenings				
I prefer contact companion	I prefer contact companion	I prefer contact companion speak:				
☐ has time for conversation	☐ has similar interests to me	☐ English ☐ French				
simply checks with me daily	relate to me their interests, which may differ from mine	☐ Spanish ☐ German ☐ Japanese ☐ Russian				
		Other:				

PAGE 2 contains optional choices for our information, to narrow your match in contact companion. If no options listed matter to you, SKIP to Page 3. And, BE SURE to sign PAGE 3 prior to mailing.



### REGISTRATION FORM PAGE 2

PLEASE PRINT LEGIBLY

This page contains optional information choices for you. At the bottom, you may specify items of your own, regarding specific desires, if you don't see them listed. We will do our best to include them in the matching process.

While LessAlone.org does not discriminate against anyone who wishes to register, we want all registered members to be happy with their contact companion. If any items listed below are important to you, we understand that you make these choices so as to locate your best match based on your desires. OR, you may SKIP to Page 3 for now, and later modify your registration.

FIRST NAME	RST NAME LAST NAME					
Prefer my contact companion be of same ethnic origin		Prefer my contact companion be of same religion		Prefer contact companion be of my political orientation		
☐ Caucasian	☐ Black	Christian	☐ Jewish	Republican		
☐ Hispanic	☐ Asian	Hindu	☐ Muslim	☐ Democrat		
☐ Native American		☐ Buddhist	☐ Mormon	□ Independent		
Other:		Other:		Other:		
COMMENTS: tell others a little more about yourself (hobbies, likes, activities, etc.)						

If you indicated on PAGE 1 that you would like your contact companion to have similar interests, mark these on PAGE 3. And then, BE SURE to sign PAGE 3 prior to mailing.



# REGISTRATION FORM PAGE 3

## IF YOU INDICATED THAT YOUR CONTACT COMPANION SHOULD SHARE YOUR INTERESTS [ON PAGE 1], CHOOSE THOSE INTERESTS BELOW.

FIRST NAME	LAST	「NAME				
CHECK MARK AS MAN' Photography Computer games Watching law/crime TV Reading novels Playing music instrumer Dancing Poetry Collecting Going to the movies Horseback riding Exploring & travel Extreme sports Car racing At-home fitness Knitting Astrology Bird watching Surfing the Internet	Fishing Sports on TV Bike racing Carpentry	Amusement parks Indoor sports Browsing antiques Adventure sports Playing cards Gardening (vegetables) Working out in a gym Singing Computer programming Jogging IT techie Boating Engine mechanics Running marathons Wood-working Sewing Art painting (oil) Repairing gadgets Crafts Go-Karts	State or county fairs Jet skis or water skiing Watching movies on TV Diet and nutrition Astronomy/star-gazing Art painting (waterpaints) Crocheting Tarot card reading Camping Social networking Cooking / baking Rock & gem hunting Fashion designing Reading the Bible Snowboarding Composing music Pottery or sculpture Browsing malls Motorcycles Mountain climbing			
Staple these 3 pages together (if mailed in). And, BE SURE you sign this page below.  Mail to: - OR - Fax to:						
ATTN: R PO Box 1	ne Endeavor egistration Processing 896 Butte, NM 87935	our toll-free fa (877) 374-679				
We do our best to match you with a contact companion within 90 days. And, although your registration and membership is free, as a new organization - we rely heavily on donations. If you would, please consider a tax-deductible donation to <b>LessAlone.org</b> . Aid our efforts, and help us reach more people!						
Yes, I am enclosing my check or money order for \$ with this registration form.						
Yes, I would like to help - but I prefer you contact me! I will make a one-time donation of:						
\$5 <b>C</b>	\$10 🗆 \$25 🗀	\$50 🗆 \$100 [	\$500			
OR a monthly pledge of \$ by using my credit or debit card.						
NO, I do not wish to donate at this time.						
Your signature (signature required prior to mailing or faxing form)						



### REGISTRATION FORM PAGE 4

KEEP FOR YOUR RECORDS
DO NOT MAIL

Thank you for completing your membership registration for LessAlone.org. Our membership guidelines are intended to promote your safety and well-being.

By signing and sending us your registration for membership, you agree to follow the membership requirements below.

Please read before mailing or faxing us your completed form. If you do NOT agree to adhere to the membership requirements, please DO NOT SEND in your registration.

- 1) Each member and their companion are asked to utilize common courtesy in their contact with each other. Always treat your contact companion with respect the same respect that you expect in return.
- 2) Make sure you are available for contact each day, at the time of day you have chosen for contact with your contact companion.
- **3)** Make sure you are available to answer your preferred contact phone each day, at the time of day you have chosen. Allowing answering machines and/or voice-mail to answer your contact phone number would not be sufficient, as your contact companion may then believe you are unable to come to the phone, and 'raise alarms' as to your safety and well-being.

Following these 3 rules above facilitates the one-on-one relationship between you, to provide each of you with the intended enjoyment, security and safety of the match with your contact companion.

Once you and your contact companion are comfortable in your contact relationship, you may let each other know the days and/or times when you may not be able to call [such as when you are on a trip, etc.].

Thank you for choosing to be a member of the LessAlone.org family.

Regards,

Debby J. Bilyew

Founder and Director Less Alone Endeavor

AKA - www.LessAlone.org

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