

We currently have a vast majority of this information, but we want to keep our information current. As many of you know, **Cambridge Wealth Management** enjoys doing things for our clients on a personal level and the information you provide will help us cater events to your preferences. This information will be kept strictly confidential.

Please fill it out and return it to us:

**5080 N 40th St Suite 455
Phoenix, AZ 85018
Fax: 602-266-7010
or scan and e-mail it to: Giselle@cambridgewm.com**

Client Name(s):

(1) _____ (2) _____

(The following info will be used to cross-check our database for any discrepancies)

DOB: _____ DOB: _____

SSN: _____ SSN: _____

E-mail address: _____ E-mail address: _____

How do you prefer to be contacted?

(1)	<input type="checkbox"/>	Home phone	(2)	<input type="checkbox"/>	Home Phone
	<input type="checkbox"/>	Work phone		<input type="checkbox"/>	Work Phone
	<input type="checkbox"/>	Cell phone		<input type="checkbox"/>	Cell phone
	<input type="checkbox"/>	E-mail		<input type="checkbox"/>	E-mail

Personal/Family Information

Wedding Anniversary Date (mm/dd/yy): _____

Future Wedding Date (if engaged) (mm/dd/yy): _____

Social Media

(1)	Facebook _____	(2)	Facebook _____
	Twitter _____		Twitter _____
	LinkedIn _____		LinkedIn _____
	YouTube _____		YouTube _____

Children's Information: (please add additional children if needed)

Name: _____

Address (if different from yours): _____

Social Security Number: _____

Date of Birth: _____

Email Address: _____

Name: _____

Address (if different from yours): _____

Social Security Number: _____

Date of Birth: _____

Email Address: _____

Name: _____

Address (if different from yours): _____

Social Security Number: _____

Date of Birth: _____

Email Address: _____

Name: _____

Address (if different from yours): _____

Social Security Number: _____

Date of Birth: _____

Email Address: _____

Name: _____

Address (if different from yours): _____

Social Security Number: _____

Date of Birth: _____

Email Address: _____

Name: _____

Address (if different from yours): _____

Social Security Number: _____

Date of Birth: _____

Email Address: _____

Name: _____

Address (if different from yours): _____

Social Security Number: _____

Date of Birth: _____

Email Address: _____

Employment Information (if retired, see below):

- (1) Employer: _____ (2) Employer: _____
Position: _____ Position: _____
Address: _____ Address: _____

Phone #: _____ Phone #: _____

If retired, where did you work previously?

- (1) Employer: _____ (2) Employer: _____
Position: _____ Position: _____

Personal Preferences

What type of car(s) do you own?

- (1) Make _____ (2) Make _____
Model _____ Model _____

Which type of wine do you prefer?

- (1) ___ Red (2) ___ Red
___ White ___ White
___ No preference ___ No preference
___ Don't drink wine ___ Don't drink wine

When visiting our office, which do you prefer to drink?

- (1) ___ Water (2) ___ Water
___ Coffee ___ Coffee
___ Iced Tea ___ Iced Tea
___ Hot Tea ___ Hot Tea
___ Soda ___ Soda
If soda, what is your favorite? If soda, what is your favorite?

Other: _____ Other: _____

Which type of coffee do you prefer?

- (1) ___ Regular (2) ___ Regular
___ Decaffeinated ___ Decaffeinated
___ No Preference ___ No Preference
___ Don't drink coffee ___ Don't drink coffee

Which type of chocolate do you prefer?

- (1) ___ Milk Chocolate
___ Dark Chocolate
___ No Preference
___ Don't care for chocolate

- (2) ___ Milk Chocolate
___ Dark Chocolate
___ No Preference
___ Don't care for chocolate

Which would you prefer to receive?

- (1) ___ Plant
___ Flowers
If flowers, what is your
favorite? _____
___ No Preference

- (2) ___ Plant
___ Flowers
If flowers, what is your
favorite? _____
___ No Preference

What newspaper do you prefer to read?

- (1) ___ Arizona Republic
___ USA Today
___ Wall Street Journal
___ Other: _____

- (2) ___ Arizona Republic
___ USA Today
___ Wall Street Journal
___ Other: _____

What is your favorite type of movie?

(1) _____

(2) _____

What is your favorite TV show?

(1) _____

(2) _____

What is your favorite snack?

(1) _____

(2) _____

What is your favorite type of music?

(1) _____

(2) _____

Do you play golf?

(1) _____ (2) _____

Do you play tennis?

(1) _____ (2) _____

Do you enjoy the theater?

(1) _____ (2) _____

Do you belong to a gym? Which one?

(1) _____ (2) _____

Do you enjoy visiting museums?

(1) _____ (2) _____

Hobbies (other than those listed above):

(1) _____ (2) _____

What is your favorite hometown attraction?

(1) _____ (2) _____

What is your favorite restaurant?

(1) _____ (2) _____

Who is your favorite author?

(1) _____ (2) _____

What kind of pets do you have? What are their names?

(1) _____ (2) _____

Do you have season tickets for any sports?

School(s)/Professional team(s)/Sport(s): _____

New/Changes/Additions to Other Advisors
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Attorney (Name/Address/Phone #):

1) _____ _____ _____ _____	(2) _____ _____ _____ _____
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CPA (Name/Address/Phone #):

1) _____ _____ _____ _____	(2) _____ _____ _____ _____
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