

PREMIERGROUP

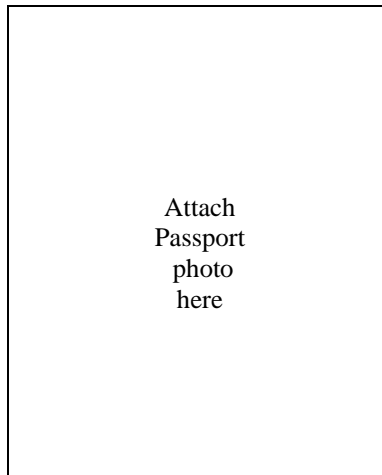
Personal Concierge Solutions

MEMBER APPLICATION

APPLICATION FORM FOR PREMIER CIRCLE MEMBERSHIP

Please note that all sections must be completed in order for the Application to be processed.

Information contained in this Application is strictly confidential.



NAME _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

HOME PHONE _____ CELLULAR _____

OCCUPATION _____

EMPLOYER _____

BUSINESS ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

BUSINESS PHONE _____ E-MAIL _____

I hereby submit application for membership into the Premier Circle. Attached is my CV along with the required passport photo. Upon acceptance, I agree to the terms of Premier Circle membership.

Signed (referring member): _____

Signed (prospective member): _____