

## CLIENT INTEREST QUESTIONNAIRE

Name \_\_\_\_\_ Preferred Name \_\_\_\_\_  
 Address \_\_\_\_\_ Email Address \_\_\_\_\_  
 Phone \_\_\_\_\_  mobile  home Employer \_\_\_\_\_  
 Do you receive texts?  **Yes**  **No**

### Spouse Information

Name \_\_\_\_\_ Preferred Name \_\_\_\_\_  
 Address \_\_\_\_\_ Email Address \_\_\_\_\_  
 Phone \_\_\_\_\_  mobile  home Employer \_\_\_\_\_  
 Do you receive texts?  **Yes**  **No**

Wedding Anniversary (if applicable) \_\_\_\_\_

What hobbies do you enjoy? \_\_\_\_\_

Favorite sports teams \_\_\_\_\_

Are you on Facebook?  **Yes**  **No** Do you follow KWMG on Facebook?  **Yes**  **No**

Are you on LinkedIn?  **Yes**  **No** Do you follow KWMG on LinkedIn?  **Yes**  **No**

Are you a wine drinker?  **Yes**  **No** Are you a beer drinker?  **Yes**  **No**

Are you a Veteran?  **Yes**  **No** Do you play golf?  **Yes**  **No**

Do you play any sports for recreation? \_\_\_\_\_

Favorite candy \_\_\_\_\_

### Which client events would you be most interested in attending? *(Select all that apply)*

- |   |   |
|---|---|
| <input type="checkbox"/> Baseball Game            | <input type="checkbox"/> Escape Room  |
| <input type="checkbox"/> Ice Hockey Game          | <input type="checkbox"/> Ice Cream Social   |
| <input type="checkbox"/> Wine Tasting or Making   | <input type="checkbox"/> Educational Dinner   |
| <input type="checkbox"/> Beer Tasting or Making   | <input type="checkbox"/> Flower Arranging Class   |
| <input type="checkbox"/> Movie Event              | <input type="checkbox"/> Charcuterie Board Class  |
| <input type="checkbox"/> Theatre or Musical Event | <input type="checkbox"/> Participate in Group Sports Activity (pickleball, cornhole, etc) |
| <input type="checkbox"/> Cooking Class            | <input type="checkbox"/> Other _____  |

### What is your favorite Thanksgiving pie?

- |                                  |  |                                       |
|----------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Apple   | <input type="checkbox"/> Chocolate Cream | <input type="checkbox"/> Cherry       |
| <input type="checkbox"/> Pumpkin | <input type="checkbox"/> Pecan           | <input type="checkbox"/> Other: _____ |

**Please email completed questionnaire back to us:**

Email: [info@kingstonwm.com](mailto:info@kingstonwm.com)

Mail: Kingston Wealth Management Group, 152 Deming Street, South Windsor, CT 06074