

SCL - APPLICATION FORM

Please complete **ALL** sections of this form. Please use **BLOCK CAPITALS**

1 Your Details

TITLE (eg Mr, Mrs, Miss, Ms, Dr etc)

FIRST NAME(S)

SURNAME

SEX (M or F)

AGE (years)

ADDRESS (including postcode)

TELEPHONE NUMBER

E-MAIL ADDRESS

2 How smooth are you? (tick the box(es) in ONE category from A to G below which best describes your current smooth state). NB This section is for statistical purposes only

A) Not depilated at all

B) Pubic smoothie - only pubic hair removed

C) Smoothie - pubic hair and *some* other body hair removed. Please specify which of the following areas you depilate:

- head
- eyebrows/eyelashes
- face
- pubic hair
- shoulders/neck
- back
- chest
- underarms
- stomach
- arms/hands
- bottom
- legs/feet

D) Totally smooth - all hair removed from arms, legs and body (ie totally hairless from neck to toe)

E) Ultra smooth – totally hairless from top of head to toe (ie all hair removed except eyebrows)

F) Dolphin smooth – no hair *anywhere* (ie all hair removed)

G) Naturally hairless – alopecia universalis

3 How long have you depilated? (in years)

_____ years

4 Naturist organisations

If you belong to any naturist organisations please give details of your membership (membership number and number of years you have been a member):-

CCBN _____

Coast and Country _____

Suntreckers _____

SOC _____

Naturist Club (specify) _____

5 How did you find out about SCL? (tick as appropriate)

Saw leaflet

SCL web site

Saw advert/article in a naturist publication

SCN website

Told about it

At an event

Other _____

6 Do any of your friends wish to find out about/join SCL? If so, please give their name(s) and address(es):-

7 Declarations (by signing the bottom of this form you will be confirming your acceptance of these declarations. If any signatures are omitted, your application cannot be accepted)

- I/we consent to the personal data contained in this application form being stored on computer
- I/we agree that if this application is successful I/we will abide by and be subject to the rules of SCL for the time being in force
- I/we understand that the organiser of SCL can refuse to accept my/our application and shall not be required to give any reason for such refusal
- I/we enclose 6 first class stamps (if applying by post)
- I/we enclose a naturist photograph(s)/passport photograph(s) of me/us

8 Signature(s) (all applicants must sign this form)

9 Date

Please return this form by e-mail to:-

smoothnaturism@yahoo.co.uk

or by post to:-

SCL
PO Box 7898
Hucknall
Nottingham
NG15 7WS