

ORIENTATION QUESTIONNAIRE FORM

Please complete the following form and email back to Lisa Property Services.

Name:

Address:
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Contact Number: Home: Office:

Fax: Email:

Nationality:

Children's Names	Age:	Sex:
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Please check areas of interest that you would like to include in the Orientation.

- Housing
- Schools
- Health Clubs
- Int'l social clubs (Women's groups etc.)
- Chambers of Commerce

- Health (Hospitals, Dental Clinics etc.)
- Super markets
- Department Stores

Please list down below other interest, Special Needs or Requirements that you would like to include or for us to give information on in the Orientation:

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Date Orientation required:

Lisa Property Services
Email: lisaprop@truemail.co.th