Grant's Corporate Consulting
New Client Form

Client Info	
Client Name	
Street Address	
City State Zip	
Phone	
Email Address	

What acconting system are you currently using? _____

What type of entity are you? _____

Which industry are you in? _____

How many employees do you have?_____

What is the top area (or areas) you would like assistance with?

_____
_____
_____
_____
_____
_____

Which areas of your business (if any) would you like to streamline or improve efficiency?

_____
_____
_____
_____
_____
_____