



## INTAKE FORM

### PERSONAL INFORMATION

FULL NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

PRONUNCIATION OF NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ GENDER: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

Can a text message be left on your Number? YES: \_\_\_\_\_ NO: \_\_\_\_\_

Can a Voicemail be left on your Number? YES: \_\_\_\_\_ NO: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

ADDRESS 1: \_\_\_\_\_

ADDRESS 2: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

**STOP THE STATIC LIFE COACHING, LLC.**

**WEBSITE:** [Stopthestatic.net](http://Stopthestatic.net)

PO BOX 4554 Greenwood Village, Co. 80155, USA

**LOCAL PHONE:** 720-460-0941 **TOLL FREE:** 1-866-341-1665



## INTAKE FORM

### EMPLOYMENT

EMPLOYER: \_\_\_\_\_

JOB POSITION/TITLE: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_

WORK ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

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### EMERGENCY CONTACT

EMERGENCY CONTACT NAME: \_\_\_\_\_

RELATIONSHIP TO EMERGENCY CONTACT: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

The issue of confidentiality is paramount to this relationship. I understand that nothing in this relationship will be discussed outside of our conversations. There are times when references to others may be helpful, however, I would never mention a name or person that would lead someone to infer the discussion was about you as a client.

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