

## Shadow Work Seminars Confidential Information Sheet

Please answer the following questions to the best of your ability. You may attach another sheet if necessary. This information is strictly confidential. Only the seminar staff will have access to it. No copies will be made, and this sheet will be destroyed after the workshop.

	Name	Age
1.	Have you ever been in therapy? If yes, please explain.	
2.	Have you ever experienced flashbacks, or extreme fear about physical Do you have memories of physical, sexual or ritual abuse? If yes, please	ıl touch? ıse explain.
3.	Do you have any history as the victim or perpetrator of violence? If yes	s, please explain.
4.	Have you, or anyone in your family, ever been suicidal? If yes, please	e explain.
5.	Do you have any physical injuries or limitations?	
6.	Have you ever lost a close family member or friend to death? If yes, p	lease explain briefly.

7.	What are your addictions? What have you been addicted to in the past?
8.	Do you have a spiritual practice or belief? If so, please describe what you have faith in.
9.	Are you currently in a committed relationship and do you have children?
10.	Please be aware that Shadow Work Seminar staff are not therapists and Shadow Work Seminars are not therapy groups. However, Shadow Work may stir up issues that require therapy, or at least a strong support network. Please describe the support network you currently have in your life. Are you willing to commit yourself to spend the time, energy and money to get yourself the support you might need after the weekend?