

Client Notes for Private Session

Please complete and return prior to attending your appointment

NAME (Please print)	
Agreed date for initial Session –	
Date(s) for follow up Session(s) –	
FULL ADDRESS:	
TELEPHONE:	Home:
Business:	
Mobile:	e-mail
MARITAL STATUS:	AGE:
	DATE OF BIRTH:
OCCUPATION:	

What do you want?

Write out what you want to achieve, what are your goals, & dreams.

What's important to you?

Previous attempted solutions:

What's stopping you?

What would you do if you knew you couldn't fail?

What will be different once these changes occur?

What will be different in your life as a result of having this change?

How is this change going to affect family and friends?

Signed:

Date: