

CLIENT INTAKE FORM

Your comfort and emotional safety matter. You may skip any question that feels too personal. Everything you share is confidential and used only to support your coaching experience.

SECTION 1 — CONTACT INFORMATION

Full Name: _____

Email Address: _____

Phone Number: _____

Preferred Pronouns: _____

Time Zone: _____

SECTION 2 — ABOUT YOU

1. What brings you to coaching at this time?
2. What life transition are you currently navigating?
3. What are the top 1–3 goals you want to work on?
4. What challenges, patterns, or emotions have been coming up for you?
5. What type of support do you feel you need most right now?

SECTION 3 — TRAUMA-INFORMED SUPPORT

6. Are you currently receiving therapy or mental health support?

Yes No Prefer not to say

7. Is there anything I should know to help create a safe, supportive space for you?

8. What helps you feel grounded when discussing emotional or sensitive topics?

★ SECTION 4 — RELIGIOUS OR SPIRITUAL BELIEFS (Optional)

Do you have any religious or spiritual beliefs that you would like me to be aware of so I can support you respectfully and in alignment with your values?

(Optional)

SECTION 5 — COACHING PREFERENCES

9. How would you describe your preferred communication style?

(Direct, gentle, structured, reflective, etc.)

10. What session pace feels best for you?

Slow Moderate Structured / Action-Focused

11. Do you want optional homework or action steps between sessions?

Yes No

SECTION 6 — TEXT SUPPORT CONSENT

Text support is available Monday–Saturday, 8 AM–5 PM for check-ins, grounding, and clarification.

I agree to the text support guidelines.

SECTION 7 — COACHING BOUNDARIES

Coaching is not therapy and does not diagnose or treat mental health conditions.

I understand and agree to the coaching boundaries.

SECTION 8 — PAYMENT POLICY

Payment is required before sessions begin. Sessions will not be scheduled until payment is received.

I understand and agree to the payment policy.

SECTION 9 — FINAL NOTES

Is there anything else you would like me to know before we begin working together?

SIGNATURE

Client Signature: _____

Date: _____