

# Claire Linley Therapeutic Coaching

## New Client Form

Name:

Name I should call you:

Mailing Address:

Email:

Phone number (including area code):

Other phone number:

Person to contact in an emergency:

Name:

Phone number:

Current medical conditions:

Current medications:

Name and phone number of doctor/therapist:

How did you find Claire:

Please give a brief description of where you are in your life right now and what you would like to achieve from some therapeutic coaching.

DISCLAIMER: I am not a psychologist nor a doctor. I am trained and internationally certified in EFT, Integrated Energy Techniques, NLP and Hypnotherapy. For a medical problem or serious mental health issue I will refer you to a professional should I feel it is appropriate. Throughout our work together it is important to understand that you are ultimately responsible for your own physical, mental and emotional well-being.

The information I have supplied is true and correct and I have read and understood the Disclaimer:

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_