



PHENIX  
COUNSELING

**CONFIDENTIAL CLIENT INFORMATION**

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

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_

It is OK to send correspondence to:  home  email

Please call me at:  home  cell

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex:  Male  Female

Marital Status: \_\_\_\_\_

*Whom shall we notify in case of an emergency?*

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone/Home: \_\_\_\_\_ Work: \_\_\_\_\_

Cell: \_\_\_\_\_

How did you hear of Phenix Counseling? \_\_\_\_\_

Reason for your visit (brief summary): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_