

# Welcome to Spirit Led Counselling

## Client Intake Form

Thank you for choosing Spirit Led Counselling. We're here to support you in a caring and confidential environment. Please fill out this form so we can get to know you and your needs a little better.

<b>Practice:</b>	Spirit Led Counselling
<b>Practitioner:</b>	Sharon Mackenzie   ABN 64 980 520 433

<b>Your Name:</b>	
<b>Date of Birth:</b>	
<b>Phone:</b>	
<b>Email:</b>	
<b>Emergency Contact Name:</b>	
<b>Emergency Contact Phone:</b>	

### What brings you to counselling today?

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### Which type of support would you prefer?

- Faith-Informed (includes optional spiritual support)
- General (non-faith counselling only)

### Is there anything about your medical or mental health history you'd like us to know?

(Optional)

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**Are you currently seeing a GP or any other support professionals? (Optional)**

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<b>Signature:</b>	
<b>Date:</b>	

We look forward to supporting you on your journey. If you have any questions, please don't hesitate to ask!