Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date, time and place of birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Phone number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please fill out the questions below as well as you can. Take your time and know that there are no wrong answers; whatever you choose to share is the right information to move you forward. Enjoy this first step in your process. Reach out if you have any questions. Anna

1. **Please share with me your vision for your life. What inspires you? What are you passionate about? What is your desired reality?**

\_\_\_

1. **Where are you now in relation to that vision? What does your current reality look like?**

\_\_\_

1. **What is your current relationship status (including children) and does this align with your desired reality?**

\_\_\_

1. **What is holding you back from reaching your desired reality?**

\_\_\_

1. **Do you have any mental or physical issues that you want to work through? If so, what are they?**

\_\_\_

1. **Have you had any major, life-changing experiences in your life (think: loss, illness, surgery, moving, divorce, trauma etc)?**

\_\_\_

1. **How were the relationships in your home when growing up?**

\_\_\_

1. **Anything you can add that you remember or were told about your gestation, birth and the first 7 years of life, that you feel may have left an impact?**

\_\_\_

1. **What is your primary reason for seeking a session with me? What specific support do you need at this time?**

\_\_\_

1. **What have you tried in the past to dissolve your unwanted situations? What did/didn’t work?**

\_\_\_