



In preparation for your first session please complete the relevant information with as much detail as possible. Doing it at home allows you to relax, remember, and record anything that may be relevant to help you get the most from your session(s). All information and discussions are confidential and non-judgemental so please be honest. All sections are optional. Privacy policy is available on www.philclubley.co.uk

Contact Details

Name

Address

Date of Birth

Phone

Email

How long have you lived at current address?

GP Name

GP Address

If you change residential address or GP please notify me.

Clients under the age of 16 must have a parent/guardian present during the session.

GP Telephone

Personal Information

Weight

Are you happy with your weight? Y / N

Occupation

Height

Spouse/Partner

Alcohol Y / N

Units per week

Parents

Smoking Y / N

Siblings

Children

Concerns

What would you like to address in your sessions?

Rate your concerns on a scale of 1 - 10 (1 - issue is of no concern, 10 - issue is all consuming)

Personal History

Significant Relationships and Emotional History

Family, relationships, friends, work, deaths, incidents which have been traumatic or upsetting or life changing events (positive or negative)

Are there patterns occurring in your life, whether 'good' or 'bad'?

Medical Details

Medication
Current or previous

Female Reproductive Issues
Periods, menopause, pregnancy

Childhood Illnesses
plus vaccinations etc

Past surgery or Injuries

Diet & Exercise

Diet, supplements and food issues
Describe a typical day's eating/drinking and any allergies/intolerances

Exercise and Relaxation

Other Information

Any other information you feel you would like to share?

Any energy healing/spiritual experiences you would like to share?

I understand that Kinesiologists do not give a medical diagnosis or treatment. If I have any health concerns it is my responsibility to consult a GP or relevant health professionals.

Cancellation/Missed appointments: Please give a minimum of 24 hours notice if you wish to cancel or change your appointment. Fewer than 24 hours notice, by phone, will incur a charge. A missed appointment will incur the full fee. Late arrival for an appointment may mean a shorter session which will still be charged at the full rate.

Please sign and date to confirm you understand and agree with the above statement.

Signature

Date



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