

Client Intake Form

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Please select the questions below that resonate with you and that you feel comfortable answering.

Reflection & Dream-Making

As your coach, it's important for me to understand how you view the world and your personal journey. Everyone has a unique way of thinking and interacting with life, and the more I know about you, the more meaningful and aligned our work can be. Take your time—there's no rush. You may want to sit with these questions over a few days and answer them when you feel inspired.

Coaching Goals

1. What are 2-3 things you hope to gain from our coaching relationship?
(Think about what would make this coaching experience truly valuable for you.)

Medical History & Health

2. Have you experienced any trauma in your life?
(e.g., childhood, adolescence, early adulthood, or recently)
3. Do you currently have any of the following health conditions? (Check all that apply)
 - Autoimmune disease
 - Hormonal issues (e.g., hypothyroidism, adrenal fatigue)
 - Digestive issues (e.g., IBS, GERD, food sensitivities)
 - Sleep troubles

For sleep troubles, how many hours per night

4. Please describe your current exercise routine:

5. What is your **ideal** exercise regimen?



6. How much water do you drink daily? glasses

Diet & Nutrition

7. Do you follow a specialized diet for a chronic condition?

Yes

No

If yes, please describe:

8. Are you:

Vegan

Vegetarian

Eat meat

Other:

9. Where do you typically source your food? (*e.g., farmers markets, supermarkets, local farms*)

10. Do you practice intermittent fasting or any other detox methods?

Yes

No

If yes, please describe:

Reflective Life Vision

11. Where are you currently on your personal journey?

- What strengths do you bring?



- What challenges are you facing?

12. Where would you like to be in:

- 6 months?

- 1 year?

- 5 years?

13. Are there any areas in your life where you feel **stuck**?

14. What do you want most from your:

- **Career/job?**

- **Relationships?**

- **Family?**

- **Spiritual life?**

15. What skills or knowledge would you like to develop?

16. What do you believe needs to change in your life for you to feel you've truly **lived well**?

17. What are you most passionate about?

18. What kind of **impact** do you hope to make—in your family, community, country, or the world?

19. What 2-3 things are currently **working well** in your life?

20. How do you typically handle **pressure, anxiety, or stress**?



21. If **money and time were no object**, what would you love to create or achieve in the next 5 years?

22. What feels like it's **missing** in your life right now?

What would make your life more **fulfilling**?

23. Who are the most **important people** in your life?

24. What are the **most significant events** that have shaped your life?

Please describe your top 3:

- Event 1:

- Event 2:

- Event 3:

25. Think about a time when you were at your **peak performance**—when everything was flowing, and you felt aligned:

- What was happening?

- Who else was involved?

- How did you feel during this time?

(Feel free to share as fully as you like!)

Thank You

X



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Page 5 of 5