



New Client Form

Full Name Jennifer Voon

Date of Birth 10031993

What is your gender?

Contact Number 0424 188 774

Email Address jennifer.elias93@yahoo.com

Address 6/25 Vermont St
Nollamara, WA, 6061

Occupation Corporate Advisor

Relationship Status

Are you pregnant?

Number of Children 1

Emergency Contact & Number 0450803828

Are you currently receiving any other therapies or medical treatment?

Physical Profile

Have you had any major surgeries / accidents?

Are you currently taking any medication?

Are you in any physical pain?

Check the conditions that apply to you:

Do you have any medication allergies?

How often do you consume alcohol? Occasionally

How often do you smoke? Never

Do you use any kind of illegal drugs or have you ever used them? No

Nutrition Profile

Are you taking any Vitamins or Supplements? Yes

Please list them

Magnesium, d3, c, melatonin, krill oil

How much water do you drink per day? in Litres 5

How often do you exercise and how do you exercise?

Occasional yoga, once a fortnight

Sleep & Energy Levels

How many hours sleep do you average per night? 7

Do you wake during the night? Yes

Do you have difficulty falling asleep or staying asleep? If yes, please explain further

Yes, waking up hot and stressed

How would you rate your stress levels in relation to work? 9 / 10

How would you rate your stress levels in relation to finances? 5 / 10

How would you rate your stress levels in relation to home / living situation? 8 / 10

How would you rate your stress levels in relation to personal relationships? 3 / 10

How would you rate your energy levels? 1 / 10

Health Goals

What are you wanting to work on / achieve with your sessions with Aligned with Grace and how will you know when you've achieved them?

Be at ease again and sleep well, change of mindset to be more positive

Why is this important to you?

So I can be the best person for myself and my family. I'm also exhausted.

What is stopping you from achieving this goal?

Bad thoughts of both myself and others, work situation

Accepted

SignatureA handwritten signature in black ink, consisting of stylized, overlapping loops and lines.