

Client Registration Form

**Client Information**

|  |  |
| --- | --- |
| Name *(as you preferred to be known)* |  |
| Occupation |  |

**Contact Information**

|  |  |
| --- | --- |
| Address (Home) |  |
| Invoice Address (if different) |  |
| Contact Telephone (landline) |  |
| Mobile |  |
| Email |  |
|  |
|  |

**Who to Contact In case of Emergency**

|  |  |
| --- | --- |
| Name |  |
| Relationship to you |  |
| Address  |  |
| Contact Telephone (landline) |  |
| Mobile |  |
| Email |  |
|  |
|  |

**About You**

|  |  |
| --- | --- |
| What attracts you to this Walking and Coaching programme? |  |
| What do you hope to gain from taking part? |  |
| In particular, what area of your life or work would you like to address? |  |
| Please use this space to add a bit more context if you feel it might help: |  |

**Health**

|  |  |
| --- | --- |
| What would you say is your general state of health (physical and mental) & how do you feel about it? |  |
| How do you maintain your health and wellbeing? |  |
| What concerns do you have about your health, if any? |  |
| How would you describe your energy levels? |  |

**Please note:** All data collected is for the sole purpose of supporting you and your coaching and will be kept private and confidential.

Please return your completed booking form to: sandra@walkingcoach.co.uk

Next, you will receive an invoice for £240.00 (inc vat) by return, along with a participant pack containing useful information to prepare you for this programme.

I look forward very much to working and walking with you.



Sandra Cunningham, PCC, CPCC