

Juniper Mountain Counseling

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Client Information Sheet

Name: _____

Home Address: _____

Mailing Address: _____

Phone: H)_____ Wk.)_____ Cell)_____

Please circle the most reliable number to reach you at.

May I leave a message? If so, which one(s)? Please circle. H Wk. Cell

Email Address: _____

Is email a reliable way to communicate with you? Yes No

Emergency/ Alternate Contact: _____ Ph: _____

Relation to you: _____

Would you like me to retain a charge card number? This will remain confidential. If so, please provide the following:

Visa _____ MC _____ Debit _____. Card Number: _____

Expiration Date: _____. Three digit code (back of card): _____

Thank You!

We are glad you're here.