

**Family Therapy and Renewal Center, PLLC  
Client Information**

Complete the following information for the person seeking services. Date \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Sex: M \_\_\_ F \_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Ethnicity: Caucasian \_\_\_ African American \_\_\_ American Indian \_\_\_ Asian \_\_\_ Latino \_\_\_

Referred by: \_\_\_\_\_ Referral Source \_\_\_\_\_

Primary Care Physician:-----

Reason for referral: \_\_\_\_\_

**Marital Status:**

\_\_\_ Single \_\_\_ Married \_\_\_ Separated \_\_\_ Divorced \_\_\_ Never Married \_\_\_ Widowed

**Employment Status:**

\_\_\_ Full-Time \_\_\_ Part-Time \_\_\_ Student \_\_\_ Unemployed \_\_\_ Homemaker  
\_\_\_ Unemployed \_\_\_ Not in Labor Force

**Members of the Household:**

Names	Age	Gender	Relation

Permission to receive reminder calls: (Y/N) # for reminder calls: \_\_\_\_\_

Permission to receive emails: (Y/N) Email address: \_\_\_\_\_

Emergency Contact \_\_\_\_\_

EmergencyContactPhone \_\_\_\_\_

Emergency Contact Relationship to Client \_\_\_\_\_

**Client Signature** \_\_\_\_\_

**CHILD INFORMATION**  
**18 and younger**

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **MI:** \_\_\_\_\_

**Other Names:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Cell #:** \_\_\_\_\_

**Child Lives With:** \_\_\_\_\_ **School:** \_\_\_\_\_

**Mother's Name:**

\_\_\_\_\_

**Address** \_\_\_\_\_

**Home #** \_\_\_\_\_

**Father's Name:**

\_\_\_\_\_

**Address** \_\_\_\_\_

**Home #** \_\_\_\_\_

**Mother's Employer:**

\_\_\_\_\_

**Work #** \_\_\_\_\_

**Father's Employer:**

\_\_\_\_\_

**Work #** \_\_\_\_\_

**OTHER PLACEMENT**

**Name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_

**Relationship to Client** \_\_\_\_\_

**Is child in DHS Custody or OJA?** \_\_\_\_\_ **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**Case Worker** \_\_\_\_\_ **CW Phone #** \_\_\_\_\_

**County of Jurisdiction** \_\_\_\_\_

**Person Providing Information** \_\_\_\_\_