



# Client Intake Form and Confidentiality Agreement

Full Name: \_\_\_\_\_

Pronouns: \_\_\_\_\_

Phone number: \_\_\_\_\_

Text OK?: \_\_\_\_\_

Email: \_\_\_\_\_

Email OK?: \_\_\_\_\_

Address: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Race/Ethnicity: \_\_\_\_\_

Are you in a relationship (describe): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Who do you live with: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Medical issues: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



**How would you describe yourself emotionally:** \_\_\_\_\_

\_\_\_\_\_

**What are your religious / spiritual beliefs:** \_\_\_\_\_

\_\_\_\_\_

**Have you attended coaching/counselling before:** \_\_\_\_\_

**Was it helpful:** \_\_\_\_\_

**Briefly describe what brings you to counselling now:** \_\_\_\_\_

\_\_\_\_\_

**What are your top 3 goals for counselling:**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**Anything else you would like me to be aware of?** \_\_\_\_\_

\_\_\_\_\_



## About Confidentiality

In all counselling relationships, there is an adherence to a strict standard of confidentiality. No information given by you to your coach/counsellor will be disclosed to a third party without your expressed written consent. This includes all information received verbally, electronically, in writing, or any other form of communication. Client files are privileged and confidential. **There are a few exceptions to confidentiality.**

## Confidentiality Exceptions

- If the counsellor/therapist think any person's life or health is in imminent danger, they are ethically and legally bound to take appropriate action.
- Under Provincial Law if the client suggests that a child, elder, or disabled person may be abused, neglected or for any other reason in need of protection, it must be reported to the Ministry of Children and Family Development and/or police.
- In extraordinary circumstances, the courts have discretionary power to subpoena or court order files, cases notes/or obtain counsellor information.
- The client directs the counsellor to share information with a third party.

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

**Date:** \_\_\_\_\_

Once complete, please email your signed form to: [blueonioncounselling@gmail.com](mailto:blueonioncounselling@gmail.com)

