



## (R)evolution Psychotherapy Client Intake Form

### Welcome

This form is an invitation to share what feels important for us to know as we begin working together. You are welcome to skip any question that doesn't feel relevant or safe to answer right now. We can revisit anything in conversation.

### Basic Information

- Name you'd like me to use in sessions: \_\_\_\_\_
- Pronouns: \_\_\_\_\_
- Legal name (if different, for admin purposes only): \_\_\_\_\_
- Date of birth: \_\_\_\_\_
- Contact number(s): \_\_\_\_\_
- Email: \_\_\_\_\_
- Preferred contact method:  Phone  Email  Text  Other: \_\_\_\_\_
- Is it safe to leave a message?  Yes  No  Other: \_\_\_\_\_

### Access & Communication

- Do you have any access needs or preferences for our sessions?  
(e.g., sensory environment, pacing, breaks, lighting, seating, communication style)

---

- Preferred ways of receiving information:  
 Spoken  Written  Visual aids  Other: \_\_\_\_\_
- Anything that helps you feel more comfortable or regulated in session:

---

### Support & Safety

- Emergency contact name & relationship: \_\_\_\_\_
- Emergency contact phone: \_\_\_\_\_



## (R)evolution Psychotherapy Client Intake Form

- Are there current safety concerns you'd like to share?
- Previous therapy or support experiences (positive or challenging):

---

### Goals & Hopes (if applicable)

- What brings you to therapy at this time?
- What would you like to be different after working together?
- Strengths, values, or resources you draw on:

### Practicalities

- How did you hear about this practice? \_\_\_\_\_
- Preferred session length/frequency: \_\_\_\_\_
- Payment method: \_\_\_\_\_

### Consent & Agreements

I understand that:

- What you share is yours only. I only pass it on if you ask me to, or if the law requires it to keep you or others safe—and I'll involve you whenever I can.
- I can ask questions about therapy, my rights, and this agreement at any time.
- I can withdraw consent or request changes to my care.

Client Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guardian Signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_