# Holistic Health & Wellness Intake Form

Your Name: _____

Date: _____

Personal Goals & Intentions

1. What specific goals would you like to achieve through this program?

- _____
- _____
- _____

2. What challenges have you faced in reaching these goals in the past?

- _____
- _____

3. What does optimal health and wellness look like for you one year from today?

- _____
- _____

Physical Health & Lifestyle

4. How would you describe your current physical health? (Check all that apply)

- [ ] Excellent [ ] Good [ ] Fair [ ] Poor

5. Do you have any existing health conditions or injuries? If so, please describe:

- _____

6. How often do you engage in physical activity? What types of movement do you enjoy?

- _____

7. How would you describe your current nutrition habits?

- _____

Mental & Emotional Well-Being

# Holistic Health & Wellness Intake Form

8. How do you currently manage stress? (Check all that apply)
   - [ ] Exercise  [ ] Meditation/Breathwork  [ ] Journaling
   - [ ] Talking with a friend or therapist  [ ] Other: _____

9. Do you experience frequent feelings of anxiety, depression, or overwhelm? If yes, please elaborate:
   - _____

10. What brings you joy and fulfillment in life?
   - _____

Spiritual & Personal Growth

11. Do you have any spiritual or mindfulness practices? (e.g., prayer, meditation, gratitude)
   - _____

12. What areas of personal growth are you currently focusing on?
   - _____

Daily Habits & Routine

13. What does a typical day look like for you? (Include morning and evening routines)
   - _____

14. Are there any habits you'd like to develop or eliminate?
   - _____

Recovery & Support (If Applicable)

15. Are you currently in addiction recovery or working on breaking free from unhealthy patterns?
   - [ ] Yes  [ ] No

16. If yes, what has been your biggest challenge in maintaining sobriety or positive habits?
   - _____

# Holistic Health & Wellness Intake Form

17. What kind of support would be most helpful for you on this journey?

- _____

Signature: _____

Date: _____