Client Data

Complete the following data sheet.

Date Prepared
Name
COMPANY
Address
CITY/STATE
POSTAL CODE
Day Phone
EVE PHONE
VOICEMAIL
FAX LINE
DATE OF BIRTH
OCCUPATION
NATURE OF BUSINESS/POSITION
REFERRED BY
INITIAL TERM MONTH(S)
START DATE
RENEWAL DATE
Rate \$ per
Additional Time \$ PER
BONUS AGREEMENT
PAYMENT DUE: ON OF MONTH
CALL DAY & TIME M T W TH F SA SUPMCE TIME FOR MINUTES
CALL INSTRUCTIONS
GROUND RULES
1. CLIENT CALLS AND PAYS IN ADVANCE.
2. COACH HAS PERMISSION TO BE DIRECT, THOUGH UNCONDITIONALLY CONSTRUCTIVE.
OTHER TERMS
ABOVE AGREED TO ON
CLIENT SIGNATURE
COACH SIGNATURE

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