



JENNIFER TARDELLI, MA, LPC, NCC  
PSYCHOTHERAPY • WOMEN'S ISSUES

(678) 772-9539 | JRT@JENNIFERTARDELLI.COM | WWW.JENNIFERTARDELLI.COM

**CLIENT INFORMATION:**

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

Name I prefer to be called: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Is it o.k. to leave a voice mail?    Y    N    Is it ok to send a text?    Y    N

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_    Age: \_\_\_\_    Gender: \_\_\_\_\_

Current Medications: \_\_\_\_\_

Prescribing Doctor: \_\_\_\_\_

Who referred you to me? \_\_\_\_\_

**EMERGENCY CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_**

Person responsible for charges incurred: \_\_\_\_\_

Relationship to Patient: \_\_\_\_\_ Phone: \_\_\_\_\_

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