



Client Preferences Form

Please help us keep your information correct and up-to-date by completing this form.

Client Names

Name		
Phone		
Email		
DOB		
SSN		
Anniversary		
Pet(s)		
Contact me:	<input type="checkbox"/> by phone <input type="checkbox"/> by email	<input type="checkbox"/> by phone <input type="checkbox"/> by email
I prefer:	<input type="checkbox"/> mornings <input type="checkbox"/> evenings <input type="checkbox"/> afternoons <input type="checkbox"/> weekends	<input type="checkbox"/> mornings <input type="checkbox"/> evenings <input type="checkbox"/> afternoons <input type="checkbox"/> weekends
Meeting style	<input type="checkbox"/> phone <input type="checkbox"/> in-person <input type="checkbox"/> online	<input type="checkbox"/> phone <input type="checkbox"/> in-person <input type="checkbox"/> online
EMPLOYER INFO	<input type="checkbox"/> RETIRED	<input type="checkbox"/> RETIRED
Employer		
Position		
Address		

PERSONAL PREFERENCES (check all that apply)

Drink	<input type="checkbox"/> Wine <input type="checkbox"/> Beer <input type="checkbox"/> Water <input type="checkbox"/> Soda <input type="checkbox"/> Coffee <input type="checkbox"/> Tea <input type="checkbox"/> Other	<input type="checkbox"/> Wine <input type="checkbox"/> Beer <input type="checkbox"/> Water <input type="checkbox"/> Soda <input type="checkbox"/> Coffee <input type="checkbox"/> Tea <input type="checkbox"/> Other
Movie		
Music		
Travel		
Hobbies		
Restaurants		
Author		
Sports Team(s)		
Client Event that would be of interest		

	CHILD 1	CHILD 2
Name		
Phone		
Email		
DOB		
Grandchild		

	CHILD 3	CHILD 4
Name		
Phone		
Email		
DOB		
Grandchild		

Other Professional Advisors

	ATTORNEY	CPA
Name		
Phone		
Email		

	OTHER	OTHER
Name		
Phone		
Email		

Topics of Interest

- | | |
|---|---|
| <input type="checkbox"/> Taxes (planning, strategies, etc.) | <input type="checkbox"/> Insurance planning |
| <input type="checkbox"/> Real Estate Investment Trusts | <input type="checkbox"/> Income needs |
| <input type="checkbox"/> Will or estate planning | <input type="checkbox"/> How to read financial or bank statements |
| <input type="checkbox"/> Long term care | <input type="checkbox"/> Market volatility |
| <input type="checkbox"/> Retirement planning | <input type="checkbox"/> Asset allocation |
| <input type="checkbox"/> Social Security, Medicare and health insurance | <input type="checkbox"/> Selling a family home |
| <input type="checkbox"/> Legacy planning | <input type="checkbox"/> Alternative investments |
| <input type="checkbox"/> Elder-care seminar discussing inheritance issues | <input type="checkbox"/> Socially responsible investing |
| <input type="checkbox"/> College planning | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Debt reduction | |