



## Astrology New Client Form

Please provide the information below at least 24 hours prior to your appointment so our astrologer can properly prepare for your session. Email this completed form to: [crystal@greenlotusyogactr.com](mailto:crystal@greenlotusyogactr.com)

Name \_\_\_\_\_

Date of birth \_\_\_\_\_ Time of birth \_\_\_\_\_

Place of birth (city, state, country) \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

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

Pronoun Preference \_\_\_\_\_ Occupation \_\_\_\_\_

How would you like to do your reading?  In-person - Lakeville  In-person - Mendota Heights  Zoom/online

*Are you getting a reading with your partner, spouse, child, or loved one? If so please provide their info below.*

Name \_\_\_\_\_

Date of birth \_\_\_\_\_ Time of birth \_\_\_\_\_

Place of birth (city, state, country) \_\_\_\_\_

Have you had an astrology reading before? Yes No

If yes, how often? \_\_\_\_\_

Do you have any questions or concerns about your astrology reading?

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What are your personal intentions for your astrology reading? Or what do you seek to learn from your reading?

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