



## Intake Form

Name (First): \_\_\_\_\_ (Last): \_\_\_\_\_

Date: \_\_\_\_\_

DOB: \_\_\_\_\_

Shirt Size: \_\_\_\_\_

What grade are you in?

- Sandies A.K.A Elementary \_\_\_\_
- Ki-Teens A.K.A Middle \_\_\_\_
- Hi-Heels A.K.A High \_\_\_\_
- Stilettos A.K.A College \_\_\_\_

Address:

\_\_\_\_\_

\_\_\_\_\_

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

Email: \_\_\_\_\_

Do you have any children? yes or no

If so, how many? What is their age(s)? \_\_\_\_\_

Parent or Guardian Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

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

Email: \_\_\_\_\_

Which of the following describes you? Check all that applies.

- Bullied
- Lack of self-care

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- Lack of self-confidence
- Lack of self-worthlessness/Hopelessness
- Depression/Anxiety
- Lack of social skills (cannot make friends or don't have friends)
- Weight issue
- Trauma

Which services are you seeking?

- 9-weeks course program
- WOW Girls Club (School Based only)
- Women Support Group (Bible Study)
- Young Women Group
- One-on-one Mentorship
- Grief support Group (miscarriages)
- Mighty Conquerors Community Praise Dance Team

Are you in school or work?

- School full time
- School part time
- Work full time
- Work part time

Why do you want to participate in the Heels & Confidence mentoring program?

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What do you expect to gain from our mentorship program? What can we do to support you right now?

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## CONFIDENCE

Are you able to dedicate 8 to 12 hours a month for meeting in person or virtually? Yes or No

Are you able to attend networking events on the behalf of Heels & Confidence? Yes or No

Are you willing to commit to the 9 weeks workshop training sessions? Yes or No

On a scale of 1-5, how confident are you with 1 being least confident and 5 being most confident? **(Be honest with yourself)** \_\_\_\_\_.

Is there anything else you would like for us to know about yourself, your child, or family member that was not asked:

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### Acknowledgement

I \_\_\_\_\_ fully understand that Heels & Confidence is a Christ-centered nonprofit organization. Heels & Confidence uses an evangelical approach and application of the Christian faith. I also understand that Heels & Confidence was founded on the Word of God to educate women of all ages from it. Heels & Confidence encourages ladies who are attending the program to apply what they have learned to get a better outcome in life. I also understand that Heels & Confidence will not be held liable for anything negative occurring. Heels & Confidence seeks to share with the women of all ages and walks of life the benefits in knowing thyself and gaining self-confidence based on the Word of God. Heels & Confidence believes teaching and guiding someone is to share the victories they had over their adversity. I understand not every situation I face can be fixed by Heels & Confidence, but Heels & Confidence can provide the tools and strategies on how to face, cope or overcome my adversity with the Word of God. In Addition, Heels & Confidence will provide me or my family with extra resources to seek extra help if needed. I agree to allow Heels & Confidence to record sessions for training purposes. I **Acknowledge that I have completely read and fully understand the above release.**

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I acknowledge that I am:

- 18 years old or older

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

- The legal Guardian of the following:

Please list the child(ren) name below

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Guardian Name: \_\_\_\_\_

Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Thank you for signing up with Heels & Confidence and investing in your journey of self-love, self-confidence, and self-worth.*

***“I praise you because I’m fearfully and wonderfully made” (Ps. 139:14)***

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