

**Emergency Contact Information**  
*Soulstice Sanctuary*

**CLIENT INFORMATION**

Client Name (First and Last) \_\_\_\_\_

Client Address \_\_\_\_\_

Client Phone \_\_\_\_\_

Ok to leave voicemail? (Check one)    ☐ Yes    ☐ No

Ok to text? (Check one)    ☐ Yes    ☐ No

Client Email \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

Emergency Contact Name (First and Last) \_\_\_\_\_

Emergency Contact Phone \_\_\_\_\_

Relation to Client \_\_\_\_\_