

# CHAMPIONS INTAKE FORM



## Champion's Information

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

Mailing Address : \_\_\_\_\_ Date Of Birth : \_\_\_\_\_

Mobile number : \_\_\_\_\_ Other contact information : \_\_\_\_\_

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

: \_\_\_\_\_

## Personal Information

Spouse/Partner's Name : \_\_\_\_\_

Anniversary date : \_\_\_\_\_ Business Anniversary Date : \_\_\_\_\_

Other important dates? : \_\_\_\_\_ Food Allergies? : \_\_\_\_\_

Do you have pets? :  Yes  No Social Media Channels : \_\_\_\_\_

If Yes, what is/are their name/s? : \_\_\_\_\_

Favorite Candy : \_\_\_\_\_ Favorite Quote : \_\_\_\_\_

Favorite Treat : \_\_\_\_\_

Favorite Movie : \_\_\_\_\_ Favorite Actor/Actress : \_\_\_\_\_

What is their love language? : \_\_\_\_\_

How do they want to hear from me? : \_\_\_\_\_