

# MATTHEW L. MAGRUDER, LPC

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## Personal Information Sheet

Today's Date: \_\_\_\_\_

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

Relationship Status:

\_\_\_ Single;    \_\_\_ Married;    \_\_\_ Long-term Partner;    \_\_\_ Seriously Dating;  
\_\_\_ Divorced;    \_\_\_ Separated;    \_\_\_ Widowed;

Number of Children & Ages: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Occupation: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

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

How did you hear about me? \_\_\_\_\_

Do I have your permission to thank the person who referred you to me? \_\_\_ Yes; \_\_\_ No

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## Payment Information

For payment I accept cash, credit cards, and checks that are to be made out to **MATTHEW MAGRUDER**.

The information I have provided above is accurate and current to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date