

New Life Christian Counseling, LLC  
**Richard L. Keller MSC, LPC**  
2260 S. Xanadu Way, Suite 270 Aurora, CO 80014  
Phone: 303-906-1138

**PERSONAL DATA**

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

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Marital Status: S  M  D  W

Address: \_\_\_\_\_  
Street City State Zip

Telephone: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Home Work Cell

E-mail address: \_\_\_\_\_

Employer Address

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

Name of Spouse

Social Security #: \_\_\_\_\_

Spouse's Employer Work Phone/Cell Phone

Person Responsible for payment: \_\_\_\_\_

Instructions regarding messages: \_\_\_\_\_

Referred by: \_\_\_\_\_

**INSURANCE**

Name of Insurance Company: \_\_\_\_\_  
(Please have card available for copying)

Insured's Name and SS#: \_\_\_\_\_

Subscriber ID Number: \_\_\_\_\_ Group Number: \_\_\_\_\_