

The Tara Centre

For Total Health A.C.N. 063 231 989

386 Oxford Street, MT. HAWTHORN W.A. 6016 AUSTRALIA Tel: (08) 9444 4190 E-mail: enquiries@taracentre.com.au

Client Information Sheet

Title: (circle)	Dr	Mr	Mrs	Miss	Ms	Master				
First Name(s):										
Surname:										
Date Of Birth:										
Address:										
Post Code:				_ Mobile:						
Home Ph:		Work:								
Email Address:	(in case	we are una	ble to contac	t you by pho	ne to confir	m your appointment)				
Would you like to b	e included	d on our en	nailing list fo	r news on pro	ducts/servi	ces? Yes No				
Occupation:										
Blood Group / 3	Гуре:									
Referred by:										
Т	he Tara He		is a compleme eople not thei	entary health c r diseases.	are clinic,					
				stic practitione practitioners.	ers					
				ess or ailment dical practition	er.					
	I have	read and ur	nderstood the	above informa	tion_					
Signed:			Do	ate:						

PRESENT HEALTH HISTORY

CURRENT HEALTH PROBLEM(S)

Please list the health problem(s) for which you have come to see the Practitioner. When did it/they begin?

Problem	Date Began							
MEDICATION List medications, homeopathics, vitamins, minerals or herbs y Medicine/Supplement Dosage	vou are taking. Reason							
PAST ILLNESSES AND OPERATIONS (and year)								
DO YOU HAVE ANY AMALGAM (SILVER) FILLINGS	? IF SO, HOW MANY?							
HAVE YOU EVER HAD ROOT CANAL WORK ON YOU IF SO, HOW MANY?	UR TEETH?							

FAMILY MEDICAL HISTORY

Please indicate whether you or your family have ever had any of the following health problems.

(Please tick boxes)

	You (patient)	Father	Mother	Brot	Brothers & Sisters			Children - ages		
GOOD HEALTH - in general	, ou (purioni)	, 4,,,,,,	111011101	2.0.	1,0,0 0, 0.0	7.0.0			,	
POOR HEALTH - in general										
DECEASED										
CAUSE OF DEATH										
					ı		ı		1	
AGE OF DEATH										
Addiction										
Allergies										
Anaemia										
Asthma										
Back Problems										
Bleeds Easily										
Cancer/tumours										
Depression										
Diabetes										
Digestive Problems										
Epilepsy										
Fatigue										
Female Problems										
Genetic Disease										
Glaucoma										
Gout										
Heart Trouble										
Herpes										
High Blood Pressure										
Kidney/Bladder Trouble Nervous Breakdown										
Prostate Problems										
Respiratory Problems Rheumatism/Arthritis										
Skin Conditions										
Smoking										
Stomach Ulcers										
Thyroid Problems										
Tuberculosis										
Weight Problems										
Weight Hobiens										
COMMENTS:										
OOMMENTO.										