

Intake Form for My Esteem



Legal spelling of your first and last name: _____

Date of birth: _____

Phone number: _____

Address: _____

Availability: _____

3rd party insurance or UCI number (if applicable): _____

Thank you and welcome to My Esteem!

Mental health is crucial as it affects your everyday decisions. We are here to help you feel the way you want to feel. Our passion is increasing the quality of your life.

-Michael Labiak, Registered Nurse, Founder.