

# *Application for Have Anything™ Program Consideration*

## About You

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

E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_ (day / eve)

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

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_ Type (cell/ hm/ bus/other)

## About Your Goals

Why do you want to participate in our program? \_\_\_\_\_

\_\_\_\_\_

What are you hoping to accomplish that you have not accomplished so far? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Why do you believe you have not accomplished these goals so far? \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

What else have you tried to date? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## About Your Life

What are your greatest accomplishments? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

What are your greatest challenges? \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

Who may we thank for referring you? \_\_\_\_\_

\*\* Please fax to 949-858-8583 \*\*