



# Business Bulder Care Card

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip / Postal: \_\_\_\_\_

Phone #'s: \_\_\_\_\_ Email: \_\_\_\_\_

Birthday: \_\_\_\_\_ Signifigent Other: \_\_\_\_\_

Children's names & ages: \_\_\_\_\_

Gift Ideas: \_\_\_\_\_

Shirt size: \_\_\_\_\_

Goals: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Biggest fear / Why: \_\_\_\_\_

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## NOTES

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