Coaching Connection Circles Interest Form

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| 1 | Name (First, Last) |  |
| 2 | Address (City, State, Zip) |  |
| 3 | Business Name |  |
| 4 | Email address & phone number |  |
| 5 | Coaching Area of Focus (*check all that apply*)* Career
* Divorce
* Executive
* Health & Fitness
* Leadership
* Life Vision & Enhancement
* No Specialty
* Relationship
* Small Business
* Spiritual
* Mentor Coaching
* Other
 |  |
| 6 | Topics of Interest (*check any that apply*)* Marketing/BD/Partnerships
* Peer Consultation – discussing clients/cases
* Techniques
* Coaching Skills/Approaches, for example (but not limited to)
	+ Positive Intelligence (PQ)
	+ Brene’ Brown
	+ Marshall Goldsmith
	+ Emotional Intelligence
	+ Core Energy (iPEC)
	+ Other
* Coaching Situations – “how to”
	+ Reluctant clients
	+ Not engaged clients
	+ Other
* Succession Planning for your business
* Other (fill in/comments box)
 |  |
| 7 | Would you want to be matched with local members (so you could meet in person if the group agrees)? (Y/N) |  |

One completed, please email to: *office@icf-cf.com*

Circle assignments will be communicated to all interested participants the first week of July.