

**Name**

\_\_\_\_\_  
First Name                      Last Name

**Email**

\_\_\_\_\_  
example@example.com

**Phone Number**

\_\_\_\_\_  
Area                      Phone Number  
Code

**Address**

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Street Address Line 2

\_\_\_\_\_  
City                                      State / Province

\_\_\_\_\_  
Postal / Zip Code

**What is the best time and way to contact you? Enter a date, time and phone number from the options below and please provide details.**

\_\_\_\_\_

**Date**

**Time of Birth (e.g. 12:05 PM)**

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**What days are best to contact you?**

Saturday

Sunday

Monday

Tuesday

Wednesday

Thursday

Friday

**Do you prefer morning or afternoon calls?**

Morning calls

Afternoon calls

I am flexible with my schedule and can speak in the morning or afternoon.

**What timezone are you in?**

Pacific PDT

Mountain MDT

Central CDT

Eastern EDT

Other timezone

**Phone Number**

Area Code      Phone Number

**Email Address for corresponding**

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example@example.com

**Email Address #2 alternate**

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example@example.com

**Skype name (if applicable)**

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**How did you hear about Barry Rosen and his astrology services?**

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**Have you had an astrology reading before?**

Yes

No

Prefer not to answer

**If you have had an astrology reading before, what perspective was your last astrology reading?**

Vedic Astrology

Western Astrology

Vedic and Western Astrology (a combination)

I don't know

**Would you like to share about your previous astrology readings?**

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**Full Name at Birth:**

**Date of Birth**

Month

Day

Year

**All states and cities**

**~~Confirm Place of Birth: City/Town, County (if known) State and Country~~**

**What city do you currently live in?**

**Current Zip Code**

**Please understand that it is imperative that you have the accurate time of birth to the minute in order for an accurate reading.**

**What is the source of your birth record?**

Baby book

Family Member's Recollection

Birth Certificate

Other

**Describe your education and professional background.**

**Special interests and hobbies:**

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**Current relationship status:**

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**Past Family History:**

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**Do you have children? If so, please list their names and birth information.**

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**Where do you currently live now?**

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**How can Barry best help you? What do you hope to accomplish or gain by seeking a reading?**

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**What do you see as your greatest obstacle to success?**

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**What would you most like to improve in your current state of affairs and within yourself?**

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**In an effort for Barry to fine-tune your reading, what other concerns do you have? Please consider questions related to family, parents, siblings, children, love and marriage relationships, your career/vocation/profession, your education, your health and longevity, your spirituality, your business, any legal and social matters, your home and where you live, relocation, travel etc. Please share anything else that might be useful during your reading.**

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NAME



