



Client Information Form

(Confidential – For Financial Planning Purposes Only)

Section 1: Personal Details

- Full Name: _____
- ID / Passport Number: _____
- Date of Birth: _____
- Gender: ☐ Male ☐ Female ☐ Other
- Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Widowed ☐ Other
- Spouse / Partner's Full Name: _____
- Number of Dependents (Ages): _____

Section 2: Contact Information

- Residential Address: _____

- Postal Address (if different): _____

- Email Address: _____
- Mobile Number: _____
- Work Number: _____
- Emergency Contact (Name & Number): _____

Section 3: Employment & Income

- Occupation: _____
- Employer: _____
- Employment Status: ☐ Employed ☐ Self-Employed ☐ Retired ☐ Other
- Monthly Income (after tax): _____
- Other Income Sources: _____

Section 4: Financial Information

- Bank Name: _____
- Account Type: ☐ Savings ☐ Cheque ☐ Other
- Monthly Expenses (approx.): _____
- Assets: _____

- Liabilities: _____

Section 5: Insurance & Investments

- Current Insurance Policies: _____

- Retirement Funds: _____

- Other Investments: _____

Section 6: Goals & Objectives

- ☐ Retirement Planning
- ☐ Wealth Creation / Investment
- ☐ Education Planning
- ☐ Estate Planning
- ☐ Risk / Insurance Cover
- ☐ Tax Planning
- ☐ Other: _____

Section 7: Risk Profile

(to be completed separately)

Section 8: Declarations

I hereby declare that the information provided is true and correct to the best of my knowledge.

This information will be kept confidential and used solely for financial planning purposes in accordance with the Protection of Personal Information Act (POPIA).

Client Signature: _____

Date: _____

Advisor Signature: _____