

Name:

Phone Number:

Email:

Date of Birth:

How did you hear about my practice?

### **Somatic sex education**

Somatic sex education can include coaching in breath, movement, body awareness, boundary-setting, communication, anatomy, sensate focus, massage, and other body-based teaching about sex. Somatic sex education is designed to nurture, deepen or awaken the sensual self. Whether you want to heal feelings of sexual shame, explore the intersection of sex and spirit, better express your desires, or deepen erotic pleasure, I welcome you on this journey.

### **Intention(s) and Goals**

Your intention(s) and goals will guide this work. I am here to support your deepest and highest intention(s) for yourself. Please consider and state your deepest intention(s) regarding sexuality, eros, spirituality and wellbeing. In addition, please write down any specific goals that you would like to accomplish during our work together.

## **Sexual History and Information**

(Please address only those questions that feel relevant. I assure professional confidentiality. If you want me to work together with your psychotherapist, medical doctor or other health practitioner, I will ask you to sign a release form.)

**Difficult things from my sexual/sensual history I want you to know are:**

**Wonderful things from my sexual/sensual history I want you to know are:**

**Difficult things about my current sexuality/sensuality I want you to know are:**

**Wonderful things about my current sexuality/sensuality I want you to know are:**

On a scale of 0-10, how well do you accept your body as it is? (0 = No acceptance 5 = Moderately accepting 10 = I love and accept my body exactly as it is.) Add details about your body-image.

**Please describe the sexual education and messages you received about sexuality while growing up:**

**Please describe your first sexual experience/s, and how you feel those experiences affected you:**

**Please describe a peak erotic experience. Think of your best erotic experiences. (What was happening? What was your inner experience? Was it alone or with a partner? What were you sensing? What were you thinking?)**

**Tell me about your intimate relationship/s:**

**If you have a partner, do they know you are receiving these sessions?**

**Would you be interested in having your partner join you in these sessions?**

**Scars from abdominal surgery, childbirth, trauma and circumcision can affect sexual function. Do you have any scars on your body that you might want to have worked on? If yes, please describe the scar and when it occurred.**

**Tell me about previous sex therapy and/or erotic bodywork experience (sexological bodywork, sensual massage, sex worker, surrogate, tantrika, other) What was most helpful? What was least helpful?**

**Do you have a spiritual practice or a sense of the sacred that is part of your life? What is the role of sexuality within this (if any)?**

**Please add anything else you would like me to know about your sexual history or current desire patterns, including gender identity, sexual orientation(s), self-pleasuring practices, fantasies, use of pornography, or any other information that you feel may be relevant.**

**How May I Serve You Best?**

**Please check or highlight items you might want to work on:**

Exploring who I am as an erotic being

Passionate Relationship, expanding possibilities for couples

Learning the anatomy of arousal

Becoming a better lover

Experiencing Erotic Massage

Exploring the intersection of sex and spirit

Loss or lack of sexual desire – inside or outside of relationship

Healing Healing female injury, sexual pain, genital pain

Healing testicle numbness, erectile dysfunction, premature ejaculation,  
inhibited ejaculation

Reconnecting to sex after childbirth, menopause, or prostate surgery

Learning to experience and give a partner extended and multiple orgasms

Deciphering sexual identity

Chronic pelvic pain, vulvodynia, constrictions that inhibit sexual function

Being sexual with a disability

Unwanted or obsessive erotic attachment, jealousy, or loneliness

Becoming orgasmic, or more orgasmic

Exploring female ejaculation

Exploring male multiple orgasm

Changing habitual sexual roles or scripts

Healing sexual abuse or trauma

Addressing troublesome turn-ons, including “pornography addiction” or unwanted fantasies

Learning about or exploring my anus/ anal sex/ prostate massage

Self-pleasuring coaching, expanding my self-pleasuring practice  
communicating desires

Exploring power and surrender as aspects of sex play and pleasure

Other:

## Bodywork

As a Somatic Sex Educator, I am trained to do massage and varieties of bodywork that can include genital and anal touch. This touch is offered only at the request of the client, and when deemed appropriate by myself as practitioner.

Through erotic touch and bodywork can assist students in developing presence within the body, opening interior awareness, and learning how the body can become more and more alive.

I offer experiential learning opportunities that consciously access profound ecstatic and erotic states.

If bodywork might be part of your learning experience, please fill in the following information.

Do you have any of the following conditions?

Please circle or **highlight** Y=Yes or N=No:

Pregnant Y / N

Osteoporosis Y / N

Inflammation Y / N

Heart Condition Y / N

Arthritis Y / N

Diabetes Y / N

Vein or Artery Conditions Y / N

Breathing problems Y / N

Pain Y / N

Scars Y/N

Epilepsy Y/N

Allergies Y/N

Are you taking any medication that could block pain/relax your muscles Y/ N

Are you currently suffering from any physical or emotional symptoms related to traumatic experience? Y / N If yes, please explain:

Do you have any sexual history, physical or mental illness, or other conditions that may affect your response to a bodywork session? Y / N If yes, please explain:

After each session, Lara suggests that you take notes about your experience. Write about practice (what happened), states (what you felt and experienced), and distractions (distracting thoughts or impulses that took away your focus). And that you send a copy to Lara. This will support your integration process and provide important guidance for future sessions.

Thank you completing this Intake Questionnaire.

Lara Gregory

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