

Financial Health Questionnaire

Rehabbing Chiro, Physio, and RMT to Peak Financial Shape



We are so excited that you're ready to level up your financial health.

Just like how your clients fill out an intake form to prepare you for their treatment, we'd like to do the same for your current financial health.



Let's get started!

Name:

Age:

Phone:

Profession:

Chiropractor

Physiotherapist

Registered Massage Therapist

E-mail:

How did you hear about us?

What is your gross annual income? (Before taxes)

\$0 to \$25,000

\$25,001 to \$50,000

\$50,001 to \$75,000

\$75,001 to \$150,000

\$150,000 +

What is your net worth? (Assets - Liabilities)

\$0 to \$25,000

\$25,001 to \$75,000

\$75,001 to \$150,000

\$150,001 to \$250,000

\$250,001 +

On a scale of 1 to 5 (5 = highest), how confident are you with your finances?

1



2



3



4



5

1. What are your top 2 personal financial goals?

a.

b.

2. What are your top 2 financial/tax challenges?

a.

b.

3. Do you currently hold a student loan?

Yes

No

4. What did you learn about money while growing up?

5. Based on your tax situation, do you know which one is better for you, RRSP or TFSA?

Yes

No

Have you maxed either your RRSP or TFSA? Please describe:

Yes

No

6. Do you have adequate insurance to protect your potential income loss?

Yes

No

7. Please describe what you are currently doing to minimize your taxes payable:

8. Are you aware insurance can help you save taxes?

Yes

No

9. Are you aware of the benefits of incorporating?

Yes

No

10. Are you aware that RRSP and money in your company will become part of your estate and taxed up to 53.5%?

Yes

No

11. If you are incorporated, how are you currently taking money out of your corporation for personal use?

Dividend

Shareholder Loan

(Please Describe)

Salary

Others

12. Do you know the tax difference between active and passive income within a corporation?

Yes

No

13. Did you know you can invest within a corporation, and use the money for retirement personally while being tax efficient?

Yes

No

Not applicable to me

13. Do you have retained earnings that are not required for business operations?

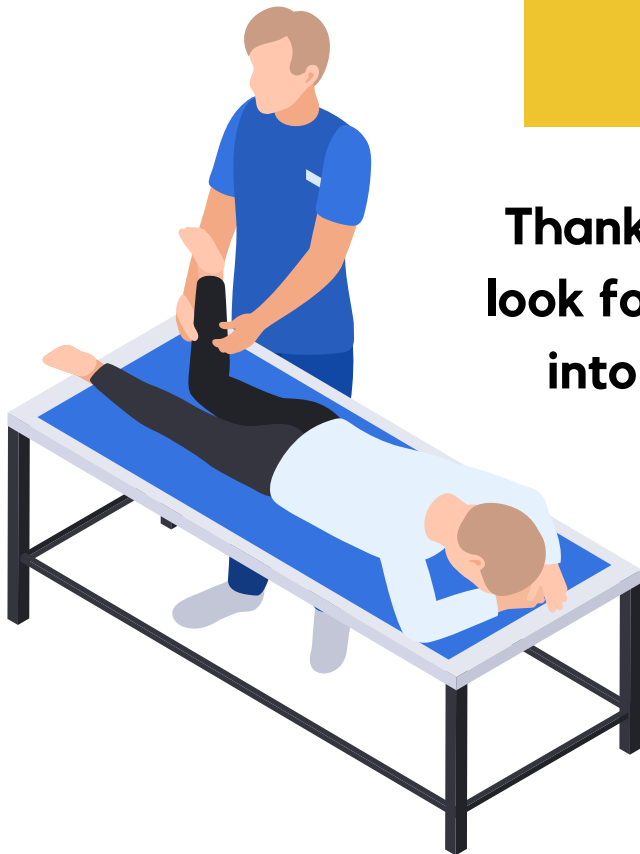
Yes

No

15. Is there anything else you'd like to learn? Please describe:

Yes

No



All Done!

Thanks for filling this out. We look forward to rehabbing you into peak financial shape!