

Client Intake Agreement

I request business assistance from JARI/JGF. I agree to cooperate should I be selected to participate in surveys designed to evaluate JARI. I authorize JARI/JGF to furnish relevant information to the assigned business counselor(s), although I expect that information to be held in strict confidence by him/her.

I further understand that all counselors have agreed not to 1) recommend goods or services from sources in which they have an interest, and 2) accept fees or commissions developing from this counseling relationship.

I understand that there are no warranties or assurances in connection with the counseling assistance. By my signature below, and in consideration of the JARI/JGF's furnishing of technical assistance, I waive all claims against JARI and JARI Growth Fund.

I hereby provide my express intent to be a client of JARI/JGF.

Date: _____

Name (print full name): _____ Signature: _____

Company _____ Title _____

Phone: (_____) _____ Email: _____

Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Choose not to Respond	Race <input type="checkbox"/> Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> White/Caucasian <input type="checkbox"/> Native American <input type="checkbox"/> Native American/Pacific Islander <input type="checkbox"/> Choose not to Respond	Hispanic Origin <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic <input type="checkbox"/> Choose not to Respond
Veteran Status <input type="checkbox"/> Veteran <input type="checkbox"/> Non-Veteran <input type="checkbox"/> Service Disabled Veteran <input type="checkbox"/> Choose not to Respond	Military Reserve Status <input type="checkbox"/> National Guard <input type="checkbox"/> National Guard – Active Duty <input type="checkbox"/> Reservist <input type="checkbox"/> Reservist – Active Duty <input type="checkbox"/> None <input type="checkbox"/> Choose not to Respond	Disabled <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Choose not to Respond
How did you hear about us? 		