PROFESSIONAL PARANORMAL INVESTIGATIONS INQUIRY SHEET

Name of caller:	Male or Female:	
Address:		
Telephone Number:	Cell Phone:	
Email Address:	Number of People in Home	
How long has activity been taking place? _	Has it happened in previous homes?	
Do you have any pictures or video?	How did you hear about us?	
Have you had any investigation before?	If so, what group:	
Who lives in your home (ages)		
Activity Taking Place?		
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Days & Times you are available for a Prelim	ninary Investigation:	