

Membership Application

Welcome to The Well – a space for seasonal wellbeing, nourishing living and meaningful connection for women in midlife and beyond.

Please complete this short application so I can get to know you and make sure The Well is the right fit for you.



YOUR DETAILS

Full Name

Email Address

Phone Number

Location (Town / City)

Date of Birth (optional)

TELL ME ABOUT YOU

What drew you to The Well?

What are you hoping to receive from being a member?

Is there anything you'd like me to know about you, your life or your current season?

WHAT YOU NEED HELP WITH

What areas of your life or wellbeing would you most like support with right now? (Please tick all that apply)

- Health & wellbeing
- Stress & overwhelm
- Rest & sleep
- Energy & vitality
- Mindset & confidence
- Relationships
- Purpose & meaning
- Life transitions
- Creativity & self-expression
- Finding balance
- Something else (please tell me below)

Please tell me more about what you need support with:

ABOUT YOUR WORK

Are you a business owner?

- Yes No

If yes, what kind of business do you have?

What kind of support would be most helpful for you in your business right now?

A LITTLE MORE...

Is there anything else you'd like to share?

HOW DID YOU HEAR ABOUT THE WELL?

- Friend / Word of mouth
- Social media
- Website
- Email / Newsletter
- Other (please specify)



Thank you

I look forward to reading your application.
I will be in touch soon.