

INITIAL CLIENT INTAKE FORM

Name: _____

Address: _____

County: _____ (where you live)

Cell Phone: _____ Home Phone: _____ Work Phone: _____

Birth Date: _____ Age: _____

In Armed Services: _____ If Yes, Stationed: _____

Can we send mail to your home? Yes No

Can we call you? Yes No Can we leave a voicemail? Yes No

If yes, which number is preferred? _____

Can we email you? Yes No

If yes, what email is preferred? _____

Other party's/spouse's name: _____

Children(s) Name: _____

Case filed? Yes No Case Number/County: _____

Is there a scheduled court date/trial? Yes No

If so, and when? _____

I understand that I am meeting with representative(s) of this law firm for an Initial Consultation. Upon completion of the Initial Consultation, I am under no obligation to hire this firm to represent me, nor is the firm under an obligation to perform further legal work on my behalf without an additional written fee agreement and/or payment of a retainer.

Dated this _____ day of _____, 20____.

Signature: _____

Print name: _____