

Client Intake Sheet

Date: _____

PLEASE COMPLETE ENTIRE INTAKE FORM

How did you hear about us?

- Yelp Google Findlaw Avvo
- US Legal Services Hyatt Other
- Referred by:** _____

- First Consult**
- Returning Client**

Type of Matter:

- Divorce Legal Separation Paternity Pre -Marital Agreement
- Domestic Violence/Restraining Order Estate Planning
- Modification: _____ Type of Modification: _____
- Other _____ Type of Matter: _____

Do either you or the other party need an interpreter? Yes No

If **Yes**, for who and which Language Needed: _____

Case Number: _____

Case Name: _____

Date of Marriage: _____

Date of Separation: _____

Client Information

Name: _____ Other/Maiden Names: _____

S.S.#: _____ Birth Date: _____ Driver's License: _____

Address: _____

E-mail: _____

Cell/Main: _____ Secondary Number: _____

Emergency Contact(s): (Name) (Relationship) (Telephone)

Job Title: _____

Employer Name: _____

Employer/Work Number: _____ Employer Address: _____

If you CANNOT receive phone calls or mail at a particular location, please indicate!!

FORM CONTINUES ON PAGE 2

PLEASE COMPLETE ENTIRE INTAKE FORM

FOR OFFICE USE ONLY

Initial And Date The Following Items When Completed:

Conflict Check: _____

Retainer Agreement: _____

Retainer Quote: _____

Future Appointment: _____

Opposing Party Information (For this matter)

Name: _____ Other/Maiden Names: _____
S.S.#: _____ Birth Date: _____ Driver's License: _____
Address: _____

E-mail: _____ Cell/Main: _____
Secondary Phone Number: _____
Employer Name: _____ Employer Number: _____
Employer Address: _____
Physical Description and Distinguishing Marks: _____

Children of this Relationship

Name: _____ Date of Birth: _____ Place of Birth: _____

Residence Information for Children of this Relationship (Last 5 years)

Provide Complete Address(es) along with how long the child(ren) stayed there.
If full address is not known, provide each City and State along with how long in each location:

Use Space Below To Provide Any Other Information/Questions Regarding Your Case:

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Initial And Date The Following Items When Completed:

Conflict Check: _____
Retainer Agreement: _____

Retainer Quote: _____
Future Appointment: _____