

NEW CLIENT INFORMATION SHEET

The purpose of an initial consultation is to assess whether my legal services can be of use to you and, if so, to discuss the fees for my services. It may not be possible to make that determination given the time allotted for our meeting or with the information that you can provide. Following our consultation, you may decide not to retain me or I may decline to represent you. For me to act as your attorney, you and I must agree in writing to the terms of my representation.

TODAY'S DATE: _____

CLIENT INFORMATION:

Client's Full Name (Mr. Mrs. Ms. Miss. Dr. Rev.) _____

Nickname _____ DOB _____

Spouses's Full Name (Mr. Mrs. Ms. Miss. Dr. Rev.) _____

Nickname _____ DOB _____

CONTACT INFORMATION:

Email: _____

Email: _____

Telephone: (Home) _____ (Cell) _____ (Work) _____

Which is your preferred method of contact? Email Home Cell Work

Is it OK to call you at work? Yes No Is it OK to leave a message with your spouse/partner? Yes No

Street Address: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different): _____

Client's Employer: _____ Spouse's Employer: _____

EMERGENCY CONTACT:

Name: _____ Relationship: _____ Phone: _____

CONFERENCE WITH ATTORNEY REGARDING:

- Trust Will DPOA Probate Guardianship/Conservatorship Elder Business/LLC
 Other

REFERRAL:

How did you hear about our office?

May we send that person a thank you card referencing your name? Yes No

FOR OFFICE USE ONLY Notes:

