

INITIAL CLIENT INTAKE

1. Name of Prospective Client: _____
2. Best Way to Contact:
 - Email Address: _____
 - Telephone #: _____
 - Address: _____
 - Other: _____
3. Spouse's Name: _____
4. Children: ___ yes ___ no Ages: _____
5. Type of Case: _____
County: _____ Has case been filed? ___ yes ___ no
Has client been served? ___ yes ___ no If so, when? _____
(If so, instruct client to bring papers.) Hearing Date: _____
Spouse's Attorney: _____
Is there ANY history of family violence? _____
6. Referral Source: _____