

Initial Meeting Information Form

The purpose of an initial consultation is for Attorney to advise you, the *prospective* client what, if anything, may be done for you, and, what the minimum fee or range of fees will be.

The purpose is not to render a definitive legal opinion, because, it may be impossible to fully assess a matter within the time frame allotted for the initial consultation, or by reviewing only the information and/or documents that you may provide at the initial consultation.

Initial meetings for certain types of legal matters generally involve a consultation fee.

If the nature of your legal matter requires an initial consultation fee, what payment form will you use?

☐ Check today ☐ Cash today ☐ I request my initial meeting be limited in time and scope
so any consultation fee does not exceed \$ _____

After your initial meeting / consultation, different outcomes may occur:

- A. You and the Attorney may mutually agree to the terms of representation**
(A separate Employment Agreement must thereafter be signed); **or,**
- B. Attorney may decline to undertake your legal matter; or,**
- C. You decide not to obtain further services, or, decline to use Attorney's services.**

Name _____
Last First Middle or Maiden

Address _____
Number Street City State Zip

Home Phone (_ _ _) _____ Other Phone (_ _ _) _____

Email (if available) _____

Help Us Understand the Reason for Your Visit Today.

Your responses are protected by attorney/client privilege and will be held in strict confidence.

Briefly explain what you may need advice about, or assistance with:

continue on back of page, if needed

If other parties are involved, please identify them. (*Examples:* friend, employer, neighbor, signer of a contract, ex-spouse, etc. This should include parties on both sides of your issue)

WHO	CONNECTION / HOW INVOLVED
_____	_____
_____	_____
_____	_____

If there are more parties involved, please make sure to tell us about **everyone** involved.

continue on back of page, if needed

List the documents (papers) that you think may help us to understand the issues.

(1) _____ (2) _____
(3) _____ (4) _____

NOTE: *Any documents you supply, that are important to your matter, will be photocopied (with your permission) and your originals will be returned to you after the initial interview.*

Ideally, if things turn out precisely the way you want, what would the desired outcome be?

Knowing there are no guarantees, what result / outcome can you accept?

Please classify your urgency in dealing with this matter? (Check as appropriate)

- ☐ Requesting office consultation and advice only.
☐ Just want to know what my rights or choices are? I'll let you know after I think about it.
☐ Thought I'd see if it was worth pursuing, but, I'm not counting on anything.
☐ Needs to be done, but I have some time. No immediate hardship or emergency in the interim.
☐ Important – Matter interferes with business or personal financial stability.
☐ Very important – Severe hardship, extreme personal or financial inconvenience if matter is not addressed quickly.
☐ Critical – Personal safety or continuation of business depends on it.

Have you previously called or consulted other attorneys about this matter? ☐ Yes ☐ No
If Yes, why didn't you retain their services?

Have you ever been represented by an attorney before (on any matter)? ☐ Yes ☐ No
If Yes, please describe the circumstances.

Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Separated ☐ Widowed

Driver's License # _____ Social Security # _____

Are you known by any other names? ☐ Yes ☐ No

If Yes - what name(s) _____
(fictitious name, nickname, former name, maiden name etc.)

How will you pay for your attorney's fees in this matter?

☐ Check or Cash today ☐ Contingency Fee ☐ Existing Account ☐ Need to discuss with attorney

Where are you employed? _____ How long? _____

May we contact you there (if very important) ? ☐ Yes ☐ No Phone No. (_ _) _____

If your mail is returned as undeliverable or your telephone service is not available, please provide the name of someone (friend or relative) you believe will always know how to contact you.

Name _____ Relationship _____

Address _____ Phone No. (_ _) _____

_____ State & Zip _____

How did you learn of our office?

☐ A friend ☐ Yellow Pages ☐ Former client ☐ Other: _____

PLEASE READ CAREFULLY & SIGN

Following your initial consultation, if you agree to hire the Attorney, and the Attorney agrees to represent you, you will sign an Employment Agreement. That Agreement will set forth the terms and conditions of representation, including your financial obligations. A copy of that signed Agreement will be given to you. If you decide not to sign an Employment Agreement today, you are strongly urged to schedule a second appointment with the Attorney at the earliest possible time or to immediately consult with other legal counsel to protect your rights.

***NOTICE:* This office does not represent you with regard to the matters set forth in this information sheet or other matters discussed during your consultation, unless and until, you and the Attorney execute a written Employment Agreement.**

If your legal problem(s) involve a potential lawsuit, it is important to realize that lawsuits must be filed within a certain period of time called a *Statute of Limitations*. Should Attorney decline to undertake your legal matter, that decision may be based on several factors, including Attorney's current workload; You should not take such decision as an expression of legal opinion regarding the merits of your case. Therefore, the Attorney strongly urges you to ***immediately*** consult with another attorney to protect your rights.

Your signature acknowledges only that you completed this information sheet. It does NOT obligate you to pay fees beyond the initial consultation fee (if applicable), and it does NOT mean you have hired the Attorney.

SIGNATURE _____

Date ____/____/____