

## **BASIC CLIENT INFORMATION FORM**

### **Consultation Fee Agreement**

I understand that there will be a \$400.00 per hour consultation fee, and that I am responsible for paying the consultation fee regardless of whether I decide to take any legal action or not. I also understand that no legal action will be undertaken prior to the signing of an employment contract, which contains provisions for a retainer fee, by both myself and the attorney.

\_\_\_\_\_

(Signature)

\_\_\_\_\_

(Printed Name)

Date: \_\_\_\_\_

### **PERSONAL INFORMATION:**

1. Please give your full legal name, date and place of birth, Driver's License number, and Social Security Number.

a. Full Legal Name: \_\_\_\_\_

(first)                      (middle)                      (last)                      (maiden)

b. Date of birth: \_\_\_\_\_ / Age \_\_\_\_\_

c. Place of birth: \_\_\_\_\_

d. Social Security Number: \_\_\_\_\_

e. Driver's License Number. \_\_\_\_\_

2. Where are you living now?

a. Address: \_\_\_\_\_

b. City, state, zip: \_\_\_\_\_

*Do you want to receive mail at this address? YES \_\_\_ / NO \_\_\_*

**\*\* MAILING ADDRESS IF DIFFERENT FROM HOME ADDRESS: \*\***

a. Address: \_\_\_\_\_

b. City, state, zip: \_\_\_\_\_

**Note regarding updates to information:**

***It is often important for us to talk to you on short notice. Due to the nature of many legal issues, our clients occasionally move, change jobs, and/or obtain unlisted telephone numbers. Please keep us informed of any change in the above information. Any charges incurred or time expended for forwarding and address correction and telephone correction will be charged to the client's account.***

3. Please give your cellular telephone number:  
Alternate telephone: \_\_\_\_\_ (Describe: \_\_\_\_\_)  
E-Mail: \_\_\_\_\_
4. Please complete the following concerning your employment and education.
- a. Employer: \_\_\_\_\_
  - b. Job title: \_\_\_\_\_
  - c. Street address: \_\_\_\_\_
  - d. City, state, zip: \_\_\_\_\_
  - e. Telephone number: \_\_\_\_\_
  - f. E-mail address: \_\_\_\_\_
  - f. Gross salary per month or annually: \$ \_\_\_\_\_
  - g. Net (take home) salary per month or annually: \$ \_\_\_\_\_
  - h. Length of employment: \_\_\_\_\_
  - i. Education: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION:**

Please provide us with the following information for a person who can be reached in case of an emergency:

- a. Name: \_\_\_\_\_
- b. Telephone number: \_\_\_\_\_
- c. Email Address: \_\_\_\_\_
- d. Address: \_\_\_\_\_
- e. Relationship to you: \_\_\_\_\_

**LEGAL ISSUES/EXPECTATIONS:**

*(If additional space is needed please continue on back)*

Please give a brief description of the issues for which you are seeking legal advice: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please state your expectations regarding your legal issues: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OPPOSING INDIVIDUAL/ENTITY**

If the legal issues you are seeking advice regarding will be opposed by another individual or entity, please provide any of the following information that is available to you:

Name of Individual/Entity: \_\_\_\_\_

Alias (includes former name): \_\_\_\_\_

Address: \_\_\_\_\_

(Or General Location if Address Unknown)

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ (Approximate if unknown)

Place of Birth: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Employer Telephone Number: \_\_\_\_\_

Spouse/Partner name: \_\_\_\_\_

Person/Entity's relationship to your Legal Issues: \_\_\_\_\_

\_\_\_\_\_  
Any other information that may be relevant to this person or entity: \_\_\_\_\_

\_\_\_\_\_

**REFERRAL:**

How, or by whom, were you referred to this office? \_\_\_\_\_