

**BRISTOL FAMILY LAW, LLC**

**CLIENT INTAKE FORM**

**GENERAL INFORMATION:**

**TODAY'S DATE** \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Fax Number: \_\_\_\_\_ (**Email is our primary method of communicating with you.**)  
Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Does the Opposing Party know you are seeking legal advice? Yes \_\_\_ No \_\_\_

How long have you resided in NM? \_\_\_\_\_ How long has the Opposing Party resided in NM? \_\_\_\_\_

Opposing Party's (OPs) Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

OPs Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP \_\_\_\_\_

OPs Phone: \_\_\_\_\_ OPs Email Address: \_\_\_\_\_

OP's Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

OPs Attorney: \_\_\_\_\_

I was referred to you by: \_\_\_\_\_

**THE CURRENT PROBLEM IS:** (Check all that apply)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Pre-Divorce Information      | <input type="checkbox"/> Divorce Information                  | <input type="checkbox"/> Establish Paternity   |
| <input type="checkbox"/> Establish Child Support      | <input type="checkbox"/> Modify Child Support                 | <input type="checkbox"/> Enforce Child Support |
| <input type="checkbox"/> Enforce Divorce Order        | <input type="checkbox"/> Second Opinion                       | <input type="checkbox"/> Other _____           |
| <input type="checkbox"/> Need Domestic Violence Order | <input type="checkbox"/> Violation of Domestic Violence Order | <input type="checkbox"/> Unsure                |

**DETAILS REGARDING THE RELATIONSHIP AT ISSUE:** (Check all that apply)

Describe your relationship with the Opposing Party:

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Amicable          | <input type="checkbox"/> Don't Get Along                              | <input type="checkbox"/> Intensely Hostile   |
| <input type="checkbox"/> Emotional Cruelty | <input type="checkbox"/> Potentially Violent                          | <input type="checkbox"/> History of Violence |
| <input type="checkbox"/> Adultery          | <input type="checkbox"/> Financial /other misrepresentations or fraud |  |

**IF YOU ARE (OR WERE) MARRIED TO THE OPPOSING PARTY:**

Date of Marriage: \_\_\_\_\_ Place of Marriage: \_\_\_\_\_ Date of Separation: \_\_\_\_\_

**MINOR CHILDREN INVOLVED IN CURRENT ISSUE:** (Please include last name of each child)

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Resides with: \_\_\_\_\_

SSN: \_\_\_\_\_

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Resides with: \_\_\_\_\_

SSN: \_\_\_\_\_

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Resides with: \_\_\_\_\_

SSN: \_\_\_\_\_

Do you support any other children? \_\_\_\_\_

**HOW QUICKLY DO YOU REQUIRE ASSISTANCE?**

List upcoming Court dates: \_\_\_\_\_

List upcoming filing deadlines: \_\_\_\_\_

List urgent problems: \_\_\_\_\_

Have you filed a petition or motion relating to this issue? \_\_\_\_\_

Has the OP filed a petition or motion relating to this issue? Yes/No List: \_\_\_\_\_

Were you served with papers? Yes/No When? \_\_\_\_\_ Have you served OP with papers? \_\_\_\_\_

What else would you like to tell us? \_\_\_\_\_

**The legal process relating to Divorce, Child Custody/Timeshare, Child Support, and Domestic Violence may be is confusing. Misunderstandings and miscommunications between members of this firm and clients could occur (i.e., who is going to do what), especially at the beginning of a case. In order to make sure that everything is clear, please be advised that our representation of you does not commence until we receive a *signed Domestic Relations Fee Agreement* and the *Retainer*.**

**FOR OFFICE USE ONLY**

Type of Case: \_\_\_\_\_ Amount per Hour: \$ \_\_\_\_\_

Is A Retainer Agreement Needed? \_\_\_\_\_ Retainer Amount: \$ \_\_\_\_\_

Is A Guarantor Required? \_\_\_\_\_ Discover Forms Needed: \_\_\_\_\_