Ashton Law Office

NEW CLIENT INTAKE FORM – Family Law

Client Name: _____
Address: _____
Phone Number: _____
Email: _____
Your DOB: ___/___/_____ Opp. Party DOB: _____/_____/_____

Nature of Case: □ Pre-Nuptial Agrmt. □ Divorce □ Custody □ Child/Spousal Support

Pre-Nuptial Agreement:

Have you and your fiancé(e) reached an agreement on terms? □ Yes □ No
Does your fiancé(e) have an attorney? □ Yes □ No *(If yes, please bring their name, phone # and email to app.)*

Divorce:

Date of Marriage: ___/___/_____ Date of Separation: ___/___/_____ Length of Marriage: _____
Is there currently a pending divorce case? □ Yes □ No *(If yes, bring paperwork to appt.)*
Do you have children? □ Yes □ No If yes, give number and ages: _____
Are you and your spouse living in separate homes? □ Yes □ No If yes, how long? _____
Which grounds of divorce would you like to discuss? □ No-Fault □ Adultery
□ Desertion/Abandonment □ Cruelty □ Other: _____
Do you own real property? □ Yes □ No If yes, how is it titled? _____
Do you own one or more cars? □ Yes □ No If yes, how is it titled? _____
Do you or your spouse own a business? □ Yes □ No
If yes, what is the nature of the business? _____
Do you or your spouse have retirement accounts? □ Yes □ No Value: $_____
Do you or your spouse own stocks/bonds? □ Yes □ No Value: $_____
Any other property valued more than $500 □ Yes □ No Value: $_____

Custody:

Has there been an order entered previously as to custody or visitation? □ Yes □ No
If yes, when and in what court was it entered? _____
Have you and the other parent agreed as to child custody/visitation arrangements? □ Yes □ No
(If yes, please describe agreement below. If no, please describe what you would like, below.)
Legal Custody: □ Joint □ Sole legal custody to _____
Physical Custody: □ Primary physical custody to _____ □ Shared
Briefly describe visitation arrangements: _____
_____

Child/Spousal Support:

Has there been an order entered previously as to spousal support? □ Yes □ No
If yes, when and in what court was it entered? _____
Would you like to discuss spousal support? □ Yes □ No *(If yes, bring paystubs & bills to appt.)*
Are you employed? □ Yes □ No Is your spouse employed? □ Yes □ No
If yes, please provide Monthly Gross Income: You $_____ Spouse $_____

Has there been an order entered previously as to child support? □ Yes □ No
If yes, when and in what court was it entered? _____
Would you like to discuss child support? □ Yes □ No *(If yes, bring paystubs & bills to appt.)*
Has there been a prior order ent
Are you employed? □ Yes □ No Is the other parent employed? □ Yes □ No
Are any of the children in day care? □ Yes □ No
Who carries health insurance on the children? □ You □ Other parent
Do you or the children's other parent support any other children? □ You □ Other parent
Do your children have any special medical or educational needs? □ Yes □ No