## Ehler Mediation and Legal Services



## **CLIENT INTAKE FORM**

Your Name  Address Phone		Business Name  Business Address  Business Phone					
				Email		Business Email	
Original Document viewed - copy attached	*	Current occupation/stat	us				
Driver's License Passport	Birth Certifica	ate Other (specify	):				
Other party/ parties information:							
Name	Business Addres		ss				
Address	Business Phone						
Phone		Is there	another person or business involved?				
Email:			Please email their name and contact information				
Ellidii:		now.					
**I need assistance and/or representation v	with the follo	wing issues:	MEDIATION				
(Please note: a referral may be required)			I and the other party require a/an:				
I need general legal assistance	Traffic Tick	ket					
Breach of Contract dispute	My Human Rights were violated		Elder Care/ Estate agreement				
Tenant or Landlord issue	I need to collect a debt		Workplace agreement				
Municipal by-law issue	I need to defend myself in court		Parental Coordination agreement				
I'm being sued/ I want to sue	Arrested/Charged		Separation/ Divorce agreement				
I need to collect a debt	I need a Notary		Landlord/Tenant agreement				
I was injured at work	Other (please specify):		Other (please specify):				
A Full Consultation is required at a flat rate of Please provide original identification for veri passport are acceptable. After the consultation through the next steps. Our fees can be selected Unbundled (one-time flat Alternatively, you may sign a Retainer Agree I hereby acknowledge that I have read the above agreement and Intake is signed, and the fee of	ification. Cleation, you beconcted as:  t fee)    ment and deve and unders	or photos of your driver's me a client, and a Service ck Fee (fixed price per seposit \$1,000 to initiate you tand that CT Ehler will no	rvice)  Subscription-based our file.				

Date \_\_\_\_