

BETTS LAW OFFICES, LLC

The following information will help us to understand the reason for your consultation. Your responses are protected by attorney/client privilege and will be held in strict confidence.

Name: _____
First Middle Last

Address: _____
Street Apt/Suite

City State Zip Code

Home Phone Business Phone Cellular Phone

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

How did you learn of our office? A friend Yellow Pages Bar Referral
 Our Web Page Former Client Other: _____

By signing this form, you acknowledge that the attorney does not represent you in the matter stated above or any other matters discussed during your consultation. You have not hired the attorney until you and the attorney agree upon and sign a Letter of Engagement or Retainer Agreement, which will set forth the terms and conditions of representation.

Signature

Date