



## CLIENT INTAKE FORM - DIVORCE WITH CHILDREN

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

File No.: \_\_\_\_\_

\_\_\_\_\_  
First Name Middle Name Last Name

Mailing Address: \_\_\_\_\_  
Street City State Zip

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

How long in AL: \_\_\_\_\_

Physical Address (if different): \_\_\_\_\_

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

Employer (Name & Address): \_\_\_\_\_

Employer Phone Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Location of Marriage: \_\_\_\_\_

Who May We Contact If We Cannot Reach You? \_\_\_\_\_  
First Name Last Name

Phone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

Opposing Party's Information:

\_\_\_\_\_  
First Name Middle Name Last Name

Mailing Address: \_\_\_\_\_  
Street City State Zip

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_



Physical Address (if different): \_\_\_\_\_

Name of Employer: \_\_\_\_\_

DOB: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Is the opposing party represented by counsel? If so, who: \_\_\_\_\_

Has the opposing party filed a Petition? \_\_\_\_\_ If So, When? \_\_\_\_\_

**REASON FOR SELECTING THIS FIRM:**

REFERRED BY: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

INTERNET: \_\_\_\_\_ OTHER: \_\_\_\_\_

**CHILDREN INFORMATION:**

How many children from this relationship? \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_ M F

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_ M F

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_ M F

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_ M F

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SSN: \_\_\_\_\_ M F

Where is/are the child(ren) residing? \_\_\_\_\_

List all addresses where your child(ren) has/have lived for the past three years:

Dates	With Whom the Children Lived	Address



Do you want your spouse to have joint legal custody? Yes\_\_\_No\_\_\_

Do you want your spouse to have visitation: Yes\_\_\_\_\_ No\_\_\_\_\_

If no, do you want your spouse to have supervised visitation? Please state why? (Understand that bad parenting that you disagree with is different than dangerous parenting.)

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Please specify what visitation or joint custody agreement you believe appropriate and, briefly, give your reasons why and the specific times you wish to have visitation/custody (i.e. birthdays): \_\_\_\_\_

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Please list your children's present:

Religion: \_\_\_\_\_

Doctor (name and address): \_\_\_\_\_

Dentist (name and address): \_\_\_\_\_

Other Medical (name and address): \_\_\_\_\_

School(s) (name and address): \_\_\_\_\_

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