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FAMILY LAW CONSULTATION FORM

Name		Phone	
Address		City/State	
Email		Education	
Employer		Occupation	

<input type="checkbox"/> Divorce based on separation of one year <input type="checkbox"/> Separation <input type="checkbox"/> Child Custody <input type="checkbox"/> Child Support <input type="checkbox"/> Alienation of Affection/Criminal Conversation	<input type="checkbox"/> Distribution/Return of Property and Debts <input type="checkbox"/> Alimony/Post-Separation Support <input type="checkbox"/> Domestic Violence Restraining Order <input type="checkbox"/> Adoption <input type="checkbox"/> Other: _____
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I understand and agree to the following:

1. Most consultations last approximately 45 minutes. The consultation fee of \$100.00 is due at the beginning of the meeting. The firm accepts cash, most major credit cards and personal checks, money orders, certified checks made payable to Bagwell Holt Smith P.A.
2. In order to ensure that everything discussed during our meeting remains legally privileged and confidential, we recommend that third parties wait in the lobby during the meeting. If it is very important to you that a friend or a family member accompany you during your consultation, please bring this up with the attorney. In addition, we recommend that children remain in the lobby and near our receptionist so we can stay focused on your case.
3. This meeting is an opportunity to discuss and ask questions about your case with an attorney. In reviewing your case, we will discuss legal options available to you. If you are interested in hiring our firm, we can discuss the scope and projected expenses of legal representation and the likely range of time your case may take until its resolution. Until you sign and return the firm's Agreement for Employment of Legal Services, please sign and date below that you understand that you not yet retained the firm to represent you and have not authorized the firm to take any action on your behalf.

 Name

 Date