

Client contact sheet

Date of your visit: _____

Your contact details

Name	
Address	
Telephone	
Email	

Your contact with RLAS

Have you been to RLAS before	Yes / No	How you heard about RLAS (circle choice)	Citizens Advice	Internet search	LawWorks	Other	Referred
If you have, when?		If other, how?					
About the same matter?	Yes / No	If RLAS needs to contact you, how can do so? (circle choice)			By email / By telephone / By post		

What are you seeking advice on?

Business / Charity services (including insurance, etc)	
Civil liberties	
Community care	
Consumer / contract	
Council (planning, parking, etc)	
Crime (including traffic offences and parking fines)	
Data protection	
Debt, personal finance, tax, insolvency	
Education (including Special Education Needs & Disability)	
Employment	
Family, divorce, relationship, child law	
Immigration	
Landlord and tenant / housing	
Litigation (civil)	
Neighbour	
Personal injury / Medical negligence	
Property ownership (leasehold, freehold)	
Services provided by a lawyer	
Welfare benefits	
Wills and probate	
Other:	

Please give details

Please provide as much relevant and factual information about your matter as you can. **You can continue over the other side.**

Please give details

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Advice given

For the lawyer to complete

Name of adviser		Date:	
Referral to:		If not able to help the client	

