



De la Cruz Law Initial Intake Form

Thank you for choosing De la Cruz Law! Before we move any further in the process we would like for you to take a moment to answer a few questions so we can serve your needs in the best and most efficient way possible. Please double check all name spellings, dates of birth, phone numbers, and email addresses to ensure they are correct. Thank you!

Legal Name as on Drivers License *

First Name	Middle Name	Last Name
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Email *

Home phone

Cell phone *

Birthday *

Address *

City	State	Zip
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I am... *

- Married
- Not Married
- Divorced/Seperated

Date of Marriage

Clients' Spouse or Second Grantor's Legal name

Spouse Birth Date

Best Way to Contact Client *

- Phone Call
- Email
- Zoom Meeting (Online Video Call)

Type of Service I Am Looking To Acquire: *

- Estate Planning - Wills Based

- Estate Planning - Trusts Based
- Probate
- Small Business Consulting

If Applicable, List Your Business' Name, EIN Number, and Mailing Address

Are You Working With Any Other Advisors? *

- Yes
- No

If Yes, Please Provide Their Name, Email Address, and Phone Number

My Technological Proficiency Is... *

- Highly Proficient
- Moderately Proficient
- Not Proficient At All

Do You And/Or Your Spouse Require Any Special Assistance?

- Physically Disabled
- Spanish Speaking
- Unable To Drive
- Visually Impaired

If You Feel The Need To Elaborate On You Special Assistance, Please Let Us Know Here.