

# STAHL & HIDIR, P.C.

Today's Date

\_\_\_\_\_

## ADOPTION/ MINOR NAME CHANGE CLIENT INFORMATION

PLEASE PRINT CLEARLY

### YOUR INFORMATION

FULL NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_, STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_ COUNTY \_\_\_\_\_

How long at this residence? \_\_\_\_\_

DATE OF MARRIAGE TO CURRENT SPOUSE  
\_\_\_\_\_

### CONTACT NUMBERS / EMAIL

(H) \_\_\_\_\_

(W) \_\_\_\_\_

(C) \_\_\_\_\_

EMAIL \_\_\_\_\_

SSN \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

EMPLOYER \_\_\_\_\_

POSITION \_\_\_\_\_ HOW LONG? \_\_\_\_\_

CRIMINAL HISTORY (please circle one) Yes No

### CURRENT SPOUSE INFORMATION

FULL NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_, STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_ COUNTY \_\_\_\_\_

How long at this residence? \_\_\_\_\_

### CONTACT NUMBERS / EMAIL

(H) \_\_\_\_\_

(W) \_\_\_\_\_

(C) \_\_\_\_\_

EMAIL \_\_\_\_\_

SSN \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

EMPLOYER \_\_\_\_\_

POSITION \_\_\_\_\_ HOW LONG \_\_\_\_\_

CRIMINAL HISTORY (please circle one) Yes No

### EMERGENCY/ADDITIONAL CONTACTS

NAME \_\_\_\_\_ RELATION \_\_\_\_\_ NUMBER \_\_\_\_\_

NAME \_\_\_\_\_ RELATION \_\_\_\_\_ NUMBER \_\_\_\_\_

**BIOLOGICAL MOTHER INFORMATION**  
(if different from above)

FULL NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_, STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_ COUNTY \_\_\_\_\_

How long at this residence? \_\_\_\_\_

**CONTACT NUMBERS / EMAIL**

(H) \_\_\_\_\_

(W) \_\_\_\_\_

(C) \_\_\_\_\_

EMAIL \_\_\_\_\_

SSN \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

EMPLOYER \_\_\_\_\_

POSITION \_\_\_\_\_ HOW LONG? \_\_\_\_\_

LAST DATE OF CONTACT WITH OR PAID  
SUPPORT FOR CHILD \_\_\_\_\_

CRIMINAL HISTORY (please circle one) Yes No

**BIOLOGICAL FATHER INFORMATION**  
(if different from above)

FULL NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_, STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_ COUNTY \_\_\_\_\_

How long at this residence? \_\_\_\_\_

**CONTACT NUMBERS / EMAIL**

(H) \_\_\_\_\_

(W) \_\_\_\_\_

(C) \_\_\_\_\_

EMAIL \_\_\_\_\_

SSN \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

EMPLOYER \_\_\_\_\_

POSITION \_\_\_\_\_ HOW LONG \_\_\_\_\_

LAST DATE OF CONTACT WITH OR PAID  
SUPPORT FOR CHILD \_\_\_\_\_

CRIMINAL HISTORY (please circle one) Yes No

**CHILD'S INFORMATION**

LEGAL NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_, STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_ COUNTY \_\_\_\_\_

Lives With? \_\_\_\_\_ For How Long? \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

STATE OF BIRTH \_\_\_\_\_

NAME CHILD WILL BE KNOWN AS \_\_\_\_\_

BRIEFLY STATE THE LEGAL ISSUE WE NEED TO  
DISCUSS:

HOW DID YOU HEAR ABOUT OUR FIRM?

\_\_\_\_\_ Referral from \_\_\_\_\_

\_\_\_\_\_ I'm a previous client

\_\_\_\_\_ AT&T Printed Yellow Pages (Phone book)

\_\_\_\_\_ Online Research

\_\_\_\_\_ Google

\_\_\_\_\_ AT&T Online Yellow Pages

\_\_\_\_\_ FindLaw

\_\_\_\_\_ Other

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ATTORNEY'S NOTES