

# Legal Services Consent Form

## Client Information

Full Name

Address

Phone Number

Email

## Consent

I, the undersigned, hereby consent to receive legal services provided by the law firm/attorney. I understand the nature, scope, and possible risks associated with these services as explained to me.

☐ I agree to the terms and conditions described above.

## Scope of Legal Services

Description of Services Provided

## Fees and Billing

Fee Structure and Billing Arrangements

## Confidentiality

All information shared will be kept confidential in accordance with applicable laws and professional obligations.

## Signatures

Client Signature

Date