



UTAH LEGAL SERVICES



Committed to Equal Justice

TERMS OF CLINIC

I, _____ (name), (referred to as "participant" or "I" or "me") understand and agree to the following:

1. This is a free legal clinic sponsored by Utah Legal Services, Inc. (referred to as "ULS"). ULS is a charitable law firm limited to handling certain types of cases and primarily assisting persons who are low income. Therefore, ULS reserves the right NOT to provide legal advice to any person.
2. This legal clinic is limited to general information about the legal system and the areas of law known to ULS advocates.
3. This clinic is designed to provide preliminary counseling and general legal information applicable to my area of need.
4. This clinic **IS NOT** intended to create an ongoing attorney-client relationship between me and the advocate. I understand that ULS **IS NOT** representing me on my current legal matter. *Consequently, I waive anything that could be construed as a conflict of interest in the future, including but not limited to consenting to allow ULS to represent anyone adverse to me in this or any other case.*
5. Because ULS is limited in its areas of practice, some areas of law may be unfamiliar to the advocate helping me. Therefore ULS may refer me to other organizations. However, ULS cannot guarantee that those agencies will provide any free legal information or assistance to me.
6. I may have the type of problem ULS would normally handle and I may be eligible for ULS services. However, before ULS will discuss my case, I understand that I must call 1-800-662-4245 (or 801-328-8891 within Salt Lake County) and have my case reviewed for acceptance or rejection through ULS's regular intake process. The regular intake process occurs between 9 a.m. and 2 p.m., Monday through Friday.

I understand and agree with the above statements and further understand that the advocate **IS NOT** representing me on my legal matter.

Date

Participant Signature

[Please get a copy of what you just signed!]

Ogden
893 24th St., #300
84401
394-9431
Fax: 394-0430

Salt Lake City
205 N. 400 W.
84103
328-8891
Fax: 328-8898

Provo
455 N. University #100
84601
374-6766
Fax: 374-0960

Cedar City
965 S. Main #3
84720
586-2571
Fax: 586-1013

St. George
229 E. St. George Blvd. #103
84770
628-1604
Fax: 628-1693



Toll Free (outside of Salt Lake County): 1-800-662-4245

CLINIC ATTENDEE (CA) INFORMATION FORM

Advocate meeting with CA (Please circle your initials):

◇ FA	◇ AR	◇ KG	◇ JS	◇ SW	◇ CRH	◇ SJ
◇ BT	◇ SB	◇ TW	◇ TL	◇ JF	◇ ML	◇ CS
◇ TLC	◇ EM	◇ CFH	◇ CM	◇ AB	◇ DK	◇ JGS
◇ BB	◇ JT		◇ GA	◇ KB	◇ LP	

◇ Other (Full name):

Clinic attended (Please circle the correct clinic location):

> Farmington > Family Law (PB) > Deaf Center (PB) > Tooele	> CLC > Park City > Guadalupe > Tooele Senior	> Brigham > Logan > Ogden	> Price > Manti > Roosevelt Richfield > Provo > Provo-Sp	> Nephi > Vernal > Fillmore	> St. George > Beaver > Cedar City > Moab
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> Other (Full Name):

Initial here

If CA is non-citizen, I verified/saw proof of legal status.

Initial here

CA is 60 or older and a resident of Utah

NOTES (please write legibly):