



LA FAMILY LAW MEDIATION

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Reg. No: 2023/279026/07

Pretoria North
PRETORIA
0182

CLIENT CONSULTATION FORM / ON-BOARDING

All information provided is strictly confidential

1. Client Details

- Full Name: _____
- ID / Passport Number: _____
- Date of Birth: _____
- Contact Number: _____
- Email Address: _____
- Physical Address: _____

2. Other Party's Details (if applicable)

- Full Name: _____
- Relationship to Client: _____
- Contact Number (if known): _____
- Email Address: _____
- Physical Address: _____

3. Nature of the Matter

(Please tick all that apply)

- Divorce / Separation
- Parenting Plan
- Child Custody / Contact
- Maintenance
- Property / Asset Division
- Family Dispute
- Court-Referred Mediation
- Other: _____

4. Brief Summary of the Matter

Please provide a short description of the issue you wish to mediate:



Website: www.lafamilymediation.co.za



5. Urgency

- Urgent
- Non-Urgent

If urgent, please explain:

6. Court Involvement

- Is this matter currently before a court? Yes No

If yes, please provide details (court, case number, upcoming dates):

7. Children Involved

- Are minor children involved? Yes No

If yes, please indicate:

- Number of children: _____
- Ages: _____

8. Legal Representation / Previous Action

- Have attorneys been appointed? Yes No
- Has mediation been attempted before? Yes No

If yes, please provide brief details:



9. Preferred Consultation Method

- In-Person
- Telephonic
- Online (Zoom / Microsoft Teams / WhatsApp)

10. Declaration & Consent

I confirm that the information provided is true and correct to the best of my knowledge. I understand that **mediation is a voluntary, confidential process** and does not constitute legal advice. I consent to LA Family Law Mediation processing my information for the purpose of providing mediation services.

Client Signature: _____

Date: _____

11. POPIA Consent & Data Protection

In terms of the **Protection of Personal Information Act, 4 of 2013 (POPIA)**, I hereby give my voluntary, specific, and informed consent to **LA Family Law Mediation** to collect, store, process, and use my personal information for purposes directly related to mediation services.

I understand that:

- My information will be treated as **confidential**.
- My information will not be shared with third parties without my consent, unless required by law or a court order.
- I have the right to request access to, correction of, or deletion of my personal information.
- My information will be retained only for as long as necessary to fulfil the purpose for which it was collected.

Client Name: _____

Client Signature: _____

Date: _____

(PLEASE ATTACH COPY OF YOUR ID)

