CONSULTING CLIENT INTAKE FORM

Consultant Name: _____ Client ID: _____

Client Personal Information:

Full Name: _____

Date of Birth (MM/DD/YYYY): _____

Government ID / Driver License No.: _____

Address: _____

Phone Number: _____

Email Address: _____

Consulting Engagement Details:

Nature of Consulting Services: _____

Scope of Work (describe):

Expected Deliverables:

Fee Structure and Payment Terms:

Fee Type (e.g., hourly, fixed): _____

Fee Amount: _____ USD

Billing Frequency (e.g., monthly): _____

Payment Method: _____

Client Responsibilities and Cooperation:

Client agrees to provide necessary information, access, and cooperation to enable Consultant to perform the services described herein. Client acknowledges that failure to provide such cooperation may impact Consultant's ability to deliver services and may affect timelines and fees.

Confidentiality:

Both parties agree to maintain the confidentiality of all proprietary or confidential information disclosed during the consulting engagement, except to the extent required by law or agreed in writing.

Intellectual Property Rights:

Consultant retains ownership of any pre-existing intellectual property, methodologies, and tools used in connection with the services. Deliverables specifically created for Client under this Agreement shall be owned by Client upon full payment, unless otherwise agreed in writing.

Termination:

Either party may terminate this Agreement upon written notice to the other party. Termination does not relieve Client of the obligation to pay for services rendered through the termination date. Consultant will deliver all work in progress upon receipt of payment for all fees due.

Limitation of Liability:

Consultant's liability arising out of or related to this Agreement shall be limited to direct damages and shall not exceed the fees paid by Client under this Agreement. In no event shall Consultant be liable for consequential, incidental, punitive, or special damages.

Indemnification:

Client agrees to indemnify and hold harmless Consultant from any claims, damages, liabilities, costs, or expenses arising out of Client's breach of this Agreement or misuse of deliverables.

Governing Law and Dispute Resolution:

This Agreement shall be governed by and construed in accordance with the laws of the State of _____, without regard to its conflict of laws principles. Any disputes shall be resolved by binding arbitration in _____ County, _____, in accordance with the rules of the American Arbitration Association.

Entire Agreement and Amendments:

This Agreement constitutes the entire agreement between the parties regarding the consulting engagement and supersedes all prior agreements, understandings, and communications. Any amendments must be in writing and signed by both parties.

Signatures:

CLIENT SIGNATURE

Signature: _____

Name Printed: _____

Date: _____

CONSULTANT SIGNATURE

Signature: _____

Name Printed: _____

Date: _____