

PRENUPTIAL AGREEMENT INTAKE FORM

PLANNING FOR LOVE, LIFE, AND LEGACY—TOGETHER!

This Prenuptial Intake Form is designed to help us understand your vision, goals, and the structure that best supports your new venture. To ensure a meaningful and productive consultation, please complete and submit this form at least **72 hours** prior to your scheduled appointment. This gives us time to carefully review your information and come prepared to offer the insight and guidance your business deserves.

Don't stress about having every document or answer upfront. Share what you can now, and we'll guide you through the rest with care and clarity. Your future together deserves protection—let's turn your shared vision into lasting security!

DISCLAIMER: Your privacy matters. Everything you share here is kept strictly confidential and used only to prepare for your consultation. Just a heads-up: completing this form doesn't establish an attorney-client relationship. Our initial meeting is simply a starting point for us to explore your needs—no pressure, no obligations until we both agree to move forward. A formal agreement must be signed in order to become an **OFFICIAL FOREVER LEGAL CLIENT**.

N	MARRIAGE	/PRE-NUPTIAL	AGREEMENT
What is the	expected date of	marriage?	
Where will t	he marriage take	e place?	
Have the we	dding invitations	s been sent out? ☐ Yes	□ No
What other	plans have been	made and/or carried out f	or the wedding?



The Prenuptial Agreement is desired by: Your main goals for the prenuptial agreement are as follows: (to separate inheritance or gifts; to address assets in the event of divorce; to address assets in the event of death; to provide spousal support, etc). How do your goals differ from your fiance's goals: What issues do you foresee with the negotiation of the prenuptial agreement? Does your fiancé have an attorney? Yes No fyes:	Yes No
Your main goals for the prenuptial agreement are as follows: (to separate inheritance or gifts; to address assets in the event of divorce; to address assets in the event of death; to provide spousal support, etc). How do your goals differ from your fiancé's goals: What issues do you foresee with the negotiation of the prenuptial agreement? Does your fiancé have an attorney? Yes No	
what issues do you foresee with the negotiation of the prenuptial agreement? What issues do you foresee with the negotiation of the prenuptial agreement? Ones your fiancé have an attorney? Yes No No	he Prenuptial Agreement is desired by:
What issues do you foresee with the negotiation of the prenuptial agreement? Does your fiancé have an attorney? □ Yes □ No Tyes:	ifts; to address assets in the event of divorce; to address assets in the event of death; to
What issues do you foresee with the negotiation of the prenuptial agreement? Ones your fiancé have an attorney? Yes No Yyes:	
oes your fiancé have an attorney? □ Yes □ No yes:	ow do your goals differ from your fiancé's goals:
oes your fiancé have an attorney? □ Yes □ No yes:	
fyes:	What issues do you foresee with the negotiation of the prenuptial agreement?
yes:	
	es your fiancé have an attorney? Yes No
ttomovic contact information.	ves:
ttorney 8 contact information:	torney's contact information:



	sions have you already made about your prenuptial agreement?
Ias your i upporting	ntended spouse made any economic contributions to you (including you while you pursued a professional interest)?
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	, ,
	, , , , , , , , , , , , , , , , , , ,



PERSONAL CONFIDENTIAL INFORMATION

What is your full name?[First Name, Middle, Last Name]				
List any other former names:				
What is your driver's license number?				
Are you a U.S. citizen? □ Yes □ No				
What is your date of birth?				
What is your social security number? [Optional]				
What is your address? [Street Address or PO Box, City, State, Zip]				
What is your county of residence?				
What is your email address?				
What is your phone number?				
What is your preferred method of contact?				
Have you had any previous marriages? ☐ Yes ☐ No				
If yes, list terminating event(s) and date(s):				
Are you currently employed? ☐ Yes ☐ No				
If Yes:				
Occupation/Position:				
Employer Name, Address, and Contact Information:				
Estimated Annual Income from Salary, Bonuses, etc.:				



FUTURE SPOUSE

What is their full name?[First Name, Middle, Last Name]
List any other former names:
What is their driver's license number?
Are they a U.S. citizen? ☐ Yes ☐ No
What is their date of birth?
What is their social security number? [Optional]
What is their address? [Street Address or PO Box, City, State, Zip]
What is their county of residence?
What is their email address?
What is their phone number?
What is their preferred method of contact?
Have they had any previous marriages? \square Yes \square No
If yes, list terminating event(s) and date(s):
Are they currently employed? □ Yes □ No
If Yes:
Occupation/Position:
Employer Name, Address, and Contact Information:
Estimated Annual Income from Salary, Bonuses, etc.:



CHILDREN (IF APPLICABLE)

Full Legal Name	DOB	SSN	Where does the child reside?	Other Parent

rovide any additional information below:				



SOURCES OF INCOME

Each person must make a full and complete financial disclosure to the other. The information contained in this form will be disclosed to the other spouse. If there are any assets not specifically identified in this form, please include those assets at the end.

Source	Type*	Expected this Calendar Year	Amount Last Calendar Year	Amount 2 Calendar Years Ago	Significant Changes Expected

* S = Salar	V
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P= Pension

D= Dividends

I= Interest

C= Capital

Gains T-Trust

R=Rent

O=Other



ASSETS

A. Real Property

Туре*	Address	Purchase Date	Purchase Price	<u>FMV</u>	Balance on Mortgage	Title Owner(s)

^{*} R = residence, I= investment/ rental, U = unimproved land, F= farm or ranch, C= commercial property, V = vacation property

B. Cash Accounts

Type	Bank	Account No. (Last 4 Digits)	Approximate Value (date)	Title Owner(s)
		(



C. Retirement Accounts, Stocks, Bonds, Annuities & Other Accounts

Туре	Financial Institution	Account No. (Last 4 Digits)	Approximate Value (date)	Title Owner(s)

D. Notes/Accounts Receivable

Owed By	Account No.	Amount Due	Due Date	Purpose

E. <u>Life Insurance</u>

Type	Insurer	Title Owner	Face Value	Beneficiaries

9



F. Business Interests

Name	Type of Entity	State Organized	Ownership Interest	Estimated Value (if Known)

Provide any additional information below:				

10



G. Other Property

Description	Title Owner(s)	FMV

H. Pets & Other Animals

Name	Type of Animal	Title Owner

A list of livestock and horses should be provided under separate cover, if applicable.

II. LIABILITIES/DEBTS

Type of Debt	Financial Institutio n	Account No. (Last 4 Digits)	Approximate Liability (Date)	Debtors/ Title Owner



Are you currently If yes, please provid	,	·	nother? □ Yes	□ No
Do you wish to int during the marria		ment that no comi	nunity property	will be created
If other, please spec	cify:			
What do you want own, spousal main What property do (i.e., keep their ow	ntenance, cash, etc you want your p	c.)? rospective spouse	to have in the ev	
What should happ	pen to your prope	rty in the event of	your death?	
What should happ	pen to your prosp	ective spouse's pro	operty in the eve	nt of their death?
How do you intend	d to file tax returi	ns? □ Joint □	Separate	
Do you want to be during marriage?			's debt he/she acc	quired before or
If other, briefly exp	lain what you wan	t:		
Do you plan on op	oening or already	have any joint acc	counts? □ Yes	□ No



If yes, please list the types of joint accounts you anticipate opening or already have:
If joint accounts are created, how should they be divided in the event of divorce?
☐ Divided Equally as Separate Property
\square Divided proportionally to funds each person contributed to the account
□ Other
Do you wish to allow gifts to each other during the marriage? \square Yes \square No
Do you want to include a requirement that one spouse provide the other with life insurance? \Box Yes \Box No
If yes, please specify which spouse will pay the life insurance premiums:
Do you have a specific dollar amount of the life insurance that must remain in force? ☐ Yes ☐ No
If yes, please specify:
Do you have a number of years the life insurance must remain in force? ☐ Yes ☐ No
If yes, please specify:
Do you want to permit the spouse who is obligated to provide the other with life insurance to substitute a bequest of cash in his/her will or revocable trust in place of all or part of the life insurance? \square Yes \square No Upon your death, should your prospective spouse be allowed to live in your separate property home? \square Yes \square No
Upon your prospective spouse's death, should you be allowed to live in his/her separate property home? \square Yes \square No

Do you wish to include provisions to address deviations from the general terms in the



event that ☐ Yes	one spouse is 100% disabled or terminally ill at the time of divorce? □ No
Do you wis ☐ Yes	sh to include language addressing attorney's fees in the event of divorce? $\hfill\square$ No
	se detail the type of language you wish to include (e.g., each responsible for their revailing party entitled to fees, etc.):
Should the	e agreement terminate after a set number of years? Yes No
If yes, pleas	se specify:
Should the ☐ Yes	elevel or amount of compensation change based on years married?
If yes, pleas	se specify:
	ADDITIONAL INFORMATION
	any potential issues or additional information you would like FOREVER know in advance of our consultation?
Are there consultation	any specific questions you have that should be addressed in our on?



CERTIFICATION

I hereby affirm that the information	contained in this questionnaire is complete and acc	urate
to the best of my/our knowledge.		
Signature	Date	

DO NOT EMAIL THIS INTAKE FORM.
TO ENSURE YOUR INFORMATION
REMAINS SECURE UPLOAD YOUR
FORM IN MYCASE. THANK YOU!