

## **Return Client Form**

1. Has any of your contact information changed since you were last here?  
Yes\_\_\_\_\_No\_\_\_\_\_
2. Has he/she become aware of where you live, (if he/she didn't know up)
3. Do you have any concerns for you safety or your children's safety?  
Yes\_\_\_\_\_No\_\_\_\_\_
4. Has there been a new incident of violence with you or your children since you were last here including threats of violence?  
Yes\_\_\_\_\_No\_\_\_\_\_
5. Does the perpetrator own any weapons?  
Yes\_\_\_\_\_No\_\_\_\_\_ If yes what type?\_\_\_\_\_
6. Has the perpetrator threatened or harmed your pets or any animals since you were last here?  
Yes\_\_\_\_\_No\_\_\_\_\_
7. Have there been any violations to your restraining order, (if you have one)?  
Yes\_\_\_\_\_No\_\_\_\_\_
8. Have you been stalked, (followed, spied on, received unwanted notes or messages on your answering machine, or had property destroyed), since you were last here?  
Yes\_\_\_\_\_No\_\_\_\_\_