



**Review of Court Order**

<b>Client Name:</b>		<input type="checkbox"/> Male	<input type="checkbox"/> Female
<b>Date of Birth:</b>		<b>Social Security Number:</b>	
<b>Address:</b>			
<b>Phone:</b>		<b>Alt. Phone:</b>	

I, \_\_\_\_\_ (Client/Parent or Legal Guardian), have reviewed my court order with:

Rana Dimmig, MSS, MLSP, LSW and/or Thomas Givler, BS  
 A New Dawn Family Solutions, LLC  
 46 South Chestnut Street, Boyertown, PA 19512  
 610-427-0619/484-577-1394

<b>Case Number:</b>		<b>County:</b>	
<b>Assigned Judge:</b>		<b>Assigned Master:</b>	
<b>Date of Most recent Order:</b>		<b>Your Lawyer:</b>	
<b>Opposing Party:</b>		<b>Their Lawyer:</b>	

- I have been ordered to attend  counseling,  visitation,  other: \_\_\_\_\_.
- I have been ordered to attend \_\_\_\_\_ sessions, or until our next court date on: \_\_\_\_\_.
- A New Dawn is required to provide written or verbal reports to the court.
- A New Dawn is required to provide written or verbal reports to the attorneys.
- A New Dawn may not provide testimony because the purpose of counseling has been determined to be therapeutic.
- A New Dawn may be required to provide testimony with regards to services provided. A subpoena will be required prior to any court appearance. Full payment of court appearance fees must be paid prior to the date of court. Travel, preparation, and testimony fees are all included in court fees.

\_\_\_\_\_  
 Client (if over 14, parent or guardian if under 14)

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Witness to signature

\_\_\_\_\_  
 Date