



**Alistair Forsyth Ygr of that Ilk**  
Advocate and Barrister at Law  
CEDR Accredited Mediator

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### Direct Access contact form

Please send the filled-in form to: [alistair@forsyth-barrister.co.uk](mailto:alistair@forsyth-barrister.co.uk)

**First Name:** \_\_\_\_\_  
(required)

**Last Name:** \_\_\_\_\_  
(required)

**Address line 1:** \_\_\_\_\_  
(required)

**Address line 2:** \_\_\_\_\_  
(required)

**City:** \_\_\_\_\_ **Postcode:** \_\_\_\_\_  
(required) (required)

**County/State:** \_\_\_\_\_

**Country:** \_\_\_\_\_  
(required)

**Email:** \_\_\_\_\_  
(required)

**Phone:** \_\_\_\_\_  
(required)

**Full name of other involved parties:**  
(required)

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**Who are you enquiring on behalf of?**

(required)

- ☐ Myself
- ☐ Someone else

**How would you like us to contact you?**

(required)

- ☐ Telephone
- ☐ Email

**Case Type:**

(required)

- |   |  |
|---|--|
| <input type="checkbox"/> Banking and Financial Services | <input type="checkbox"/> Inquests and Public Inquiries |
| <input type="checkbox"/> Business and Corporate         | <input type="checkbox"/> Insurance and Reinsurance     |
| <input type="checkbox"/> Charities                      | <input type="checkbox"/> Personal injury               |
| <input type="checkbox"/> Clinical Negligence            | <input type="checkbox"/> Professional Discipline       |
| <input type="checkbox"/> Commercial                     | <input type="checkbox"/> Professional Negligence       |
| <input type="checkbox"/> Employment and Pensions        | <input type="checkbox"/> Regulatory                    |
| <input type="checkbox"/> Health and Safety              | <input type="checkbox"/> Travel                        |
|   | <input type="checkbox"/> Wills and Probate             |

**Work required:**

(required)

- ☐ Mediation
- ☐ Drafting a settlement agreement
- ☐ Drafting documents for court
- ☐ Written advice on what my rights are or how things might work out
- ☐ Representation at court
- ☐ Other

**Have you already been to see a solicitor, barrister or legal advisor regarding your case?**

(required)

- ☐ Yes
- ☐ No

*(please provide further information if so)*

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**Are there currently any court proceedings/tribunals in progress?**

*(required)*

☐ Yes

☐ No

**Please give us a brief outline of your case:**

*(required)*

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**Please detail the amount of paperwork involved and its nature:**

*(required)*

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**Are there any forthcoming hearing dates or deadlines:**

*(required)*

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**Are there likely to be expert evidence?**

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**What do you hope to achieve in your hearing?**

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**Individuals only: are you in receipt of Legal Aid?**

*(required)*

☐ Yes

☐ No

**Other remarks/comments:**

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