

### *Short Service Clinic Retainer*

I understand that I am being assisted by the BC Human Rights Clinic (the “Clinic”) for the purpose of understanding my rights under the BC Human Rights Code (the “Code”). I understand that I am not being represented by the Clinic and that there is no promise of receiving assistance beyond today.

I understand that I will be given relevant general information about the Code and the processes and procedures of the BC Human Rights Tribunal (the “Tribunal”) based on the information I provide at today’s meeting.

Signature: \_\_\_\_\_

Print name: \_\_\_\_\_

Date: \_\_\_\_\_