

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, state bar number, and address</i>) TELEPHONE NO: _____ FAX NO.: _____ E-MAIL ADDRESS (<i>optional</i>): _____ ATTORNEY FOR (<i>Name</i>): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF MADERA 200 South G Street Madera California 93637 Civil Division	
GUARDIANSHIP OF (<i>Name</i>): _____	Minor(s)
PETITION FOR VISITATION (PROBATE)	CASE NUMBER: _____

1. Petitioner(s) (*name*): _____ requests visitation for the minor child(ren) outlined below.

<u>Child(ren) name</u>	<u>Birthdate</u>	<u>Age</u>	<u>Sex</u>
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2. Each minor child named above is currently living with the Petitioner Respondent (or) Guardian in the following county (*specify*): _____.

3. Petitioner(s) is the minor's Parent(s) Grandparent (or) Other: _____

4. Petitioner(s) requests the following specific visitation schedule with the minor(s):

5. I believe that visitation is in the best interest of the minor(s) because (*specify*): specified in Attachment 5.

6. Notice to the persons identified in Attachment 6 should be dispensed with because:

They cannot with reasonable diligence be given notice (*specify names and efforts to locate them in Attachment 6*)

Other good cause exists to dispense with notice (*specify names and reasons in Attachment 6*)

7. The names and residence addresses of the guardian, minor, and minor’s parents, brothers, sisters and grandparents are as follows:

a. Guardian:

f. Maternal Grandfather:

b. Minor:

g. Maternal Grandmother:

c. Father:

h. Paternal Grandfather:

d. Mother:

i. Paternal Grandmother:

e. Brother(s) or Sister(s) (12 years old or older):

j. Additional names and addresses:

8. Number of pages attached: _____

I/we declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF PETITIONER)

Date: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF PETITIONER)

CONSENT TO VISITATION AND WAIVER OF NOTICE

I consent to the visitation schedule and waive notice of the petition:

(DATE)

(TYPE OR PRINT NAME)

(SIGNATURE OF GUARDIAN)

(DATE)

(TYPE OR PRINT NAME)

(SIGNATURE OF GUARDIAN)

(DATE)

(TYPE OR PRINT NAME)

(SIGNATURE OF OTHER (specify))

(DATE)

(TYPE OR PRINT NAME)

(SIGNATURE OF OTHER (specify))