Children's Court of Western Australia

Application by a Dependant Minor **Form 11** *Health (Miscellaneous Provisions) Act 1911* s 334(9)

Number:	
Children's Court at:	
Date lodged:	

Confidential

Do not copy this application or divulge any information to any third party.

Applicant	Family name:	Date of birth:
	Given name:	
	Address:	
Custodial parent one	Family name:	Date of birth:
	Given name:	
	Address:	
Custodial parent two	Family name:	Date of birth:
	Given name:	
	Address:	
Applicant's signature		

Court use only

Date of hearing	Court location:	Date:
	Address:	Time:
Court orders	☐ **Granted** ☐ **Not granted** **Order** On of 20 the Children's Court sitting at , pursuant to s 334(9) *Health (Miscellaneous Provisions) Act 1911* ordered that: (1) the custodial parent or parents of _____ not be informed of the considered abortion. (2) _____is not a custodial parent of _____ and not be informed of the considered abortion.	