

Children's Court of Western Australia

<p>Notice of Acting / Ceasing to Act Protection and Care of Children <i>Children's Court of Western Australia Act 1988</i></p>

File number:
Filed at:
Filed on:

Child(ren) details	Full name	Date of birth

Next court date (if applicable)	Court date:	Court time:
	Location:	

Client	Tick appropriate box and provide full name. <input type="checkbox"/> Child(ren) <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other (state relationship to child) _____ Full name of client: _____
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Notice	The lawyer or law firm name below (tick appropriate box): <input type="checkbox"/> Is acting as a legal representative for the above client in the above proceedings. <input type="checkbox"/> Has ceased to act in any capacity for the above client in the above proceedings and a copy of this Notice has been served on the Applicant/Respondent by post at the client's last known place of residence as follows: Address: Telephone: Email: [Please provide as many contact details as instructions permit]
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Legal Practice	Lawyer's Name:	
	Name of law firm:	
	Address:	
	Telephone:	Email:

Service	A copy of this Notice has been served by post on (tick appropriate box(es)): <input type="checkbox"/> Communities <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Child representative <input type="checkbox"/> Other (state relationship to child): _____
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Signed	Signature of lawyer:	Date:
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