Person	Filing:									
	s (if not protected):									
	ate, Zip Code:									
	one:									
	Address:									
	's Bar Number:		For Clerk's Use Only							
Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent										
SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY										
In the	matter of the Guardianship of:	Case Number: JG								
A Min	or	CONSENT OF PAREN GUARDIANSHIP OF M (AND WAIVER OF NO	INOR CHILD							
REQU	IRED INFORMATION FROM PARENT, UND	ER OATH or AFFIRMATIC	DN:							
1.	INFORMATION ABOUT ME:									
	Name:									
	Street Address:									
	City, State, Zip Code:									
	Telephone:	Date of Birth:								
	I am the MOTHER or FATHER guardian.	of the minor children named	d above, who need a							

2. I have read the Petition for Appointment of Guardian of a Minor and consent to the appointment of

(name)	to	be	the	guardian	of	the	minor
children.							

3. I waive notice of all further proceedings in this matter. I understand that I can reverse this waiver by filing a written document with the court under this court case number declaring that I no longer waive notice of hearings and other court proceedings.

UNDER OATH OR BY AFFIRMATION

I swear or affirm under penalty of perjury that the contents of this document are true and correct to the best of my knowledge and belief.

Date	Parent Signature	
STATE OF		
COUNTY OF		
Subscribed and sworn to or affirmed before me this:		by
	(date)	

(notary seal)

Deputy Clerk or Notary Public