

Person Filing: _____

Address (if not protected): _____

City, State, Zip Code: _____

Telephone: _____

Email Address: _____

Lawyer's Bar Number: _____

Representing Self, without a Lawyer or Attorney for _____



**SUPERIOR COURT OF ARIZONA
IN MARICOPA COUNTY**

In the matter of:

Case Number: _____

**WAIVER BY PARENT of NOTICE of
HEARING AND APPEARANCE on
PETITION FOR TERMINATION OF
PARENT-CHILD RELATIONSHIP**

A Minor

UNDER OATH or by AFFIRMATION:

INFORMATION FROM PARENT whose rights are to be terminated

1. I, _____, am the Mother Father of the minor children named below for whom a Petition has been filed requesting permanent termination (severance) of my parental rights:

Full Name of Child	Date of Birth
_____	_____
_____	_____
_____	_____
_____	_____

2. My complete name, address, and date of birth are as follows:

Name: _____

Street Address: _____

Case Number: _____

City, State, Zip Code: _____

Telephone: _____ Date of Birth: _____

Waiver of Notice

- 1. I have read the Petition for Termination of Parental Rights between myself and the minor child or children.
- 2. 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.
- 3. I understand that waiving notice and/or failing to participate in these court proceedings may result in a court order terminating my parent-child relationship with respect to the minor(s) listed in the Petition for Termination of Parental Rights.

Signature

Date

STATE OF _____

COUNTY OF _____

Subscribed and sworn to or affirmed before me

this: _____ by _____

(Date)

(Notary seal)

Deputy Clerk or Notary Public