

Form A

CUSTODY ATTENDANCE FORM

(To be completed by legal representatives and filed at Court three days prior to any child in custody listing)

Legal representative to complete	
Date of hearing:	
Name of child:	
D.O.B.:	
Court reference number/s:	
Child located at:	PARKVILLE / MALMSBURY (Please circle)
Is there a summary case conference, a contest mention or a contest hearing listed subsequent to this hearing?	YES / NO (Please circle) If YES, please advise the future date and listing type.
Is the matter part-heard before a judicial officer?	YES / NO Before whom?
Have you obtained updated instructions from the child for this hearing? Date instructions last obtained?	YES / NO (Please circle) Date:
Waiver request:	YES / NO (Please circle)
*Please note all waiver requests must be approved by a judicial officer prior to having the child sign the waiver.	If YES, Please advise reasons for waiver request? Eg Brief not yet received.
	If NO, Please advise how you intend the matter to proceed on the listing date. Eg. Plea of guilty
Is the attendance of the legal representative of the child required?	YES / NO
Legal representatives details:	Name: Firm:
Coordinators to complete	
Date filed at Court:	
Hearing/s confirmed:	YES / NO (Please circle)
Judicial Officer to complete	
Request for waiver	GRANTED / REFUSED
Any additional Directions: Eg. If this matter is unsuitable for a waiver, is the matter suitable to proceed by way of videolink?	
Coordinator to notify solicitor & Parkville/Ma	Imsbury of outcome.