

Attachment A – Additional Children and Parties

Additional Children							
Full Name	DOB	Age	Lawyer	Firm	ICL	Y	N
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

Additional Parties (parents and joined parties ONLY)							
Party 5							
Full Name		Relationship to child/ren					
DOB	Address						
Phone	Email						
<input type="checkbox"/> Served	<input type="checkbox"/> Not served	<input type="checkbox"/> To be served	<input type="checkbox"/> Present at Court	<input type="checkbox"/> Dispensed with Service	<input type="checkbox"/> Registrar's Letter	<input type="checkbox"/> Joined as party	<input type="checkbox"/> Deceased
<input type="checkbox"/> Self-represented							
<input type="checkbox"/> Legally represented		Lawyer	Firm				
Party 6							
Full Name		Relationship to child/ren					
DOB	Address						
Phone	Email						
<input type="checkbox"/> Served	<input type="checkbox"/> Not served	<input type="checkbox"/> To be served	<input type="checkbox"/> Present at Court	<input type="checkbox"/> Dispensed with Service	<input type="checkbox"/> Registrar's Letter	<input type="checkbox"/> Joined as party	<input type="checkbox"/> Deceased
<input type="checkbox"/> Self-represented							
<input type="checkbox"/> Legally represented		Lawyer	Firm				
Party 7							
Full Name		Relationship to child/ren					
DOB	Address						
Phone	Email						
<input type="checkbox"/> Served	<input type="checkbox"/> Not served	<input type="checkbox"/> To be served	<input type="checkbox"/> Present at Court	<input type="checkbox"/> Dispensed with Service	<input type="checkbox"/> Registrar's Letter	<input type="checkbox"/> Joined as party	<input type="checkbox"/> Deceased
<input type="checkbox"/> Self-represented							
<input type="checkbox"/> Legally represented		Lawyer	Firm				
Party 8							
Full Name		Relationship to child/ren					
DOB	Address						
Phone	Email						
<input type="checkbox"/> Served	<input type="checkbox"/> Not served	<input type="checkbox"/> To be served	<input type="checkbox"/> Present at Court	<input type="checkbox"/> Dispensed with Service	<input type="checkbox"/> Registrar's Letter	<input type="checkbox"/> Joined as party	<input type="checkbox"/> Deceased
<input type="checkbox"/> Self-represented							
<input type="checkbox"/> Legally represented		Lawyer	Firm				