

Name: _____
Mailing Address: _____

Daytime Telephone: _____
Representing Self, Without a Lawyer



IN THE SUPERIOR COURT OF ARIZONA, YAVAPAI COUNTY

Regarding the matter of

_____ 1300DO _____

Petitioner(s)
and

**RESPONSE TO PETITION
TO ESTABLISH
GRANDPARENT VISITATION**

Respondent(s) [Mother/Father/Legal Guardian]

GENERAL INFORMATION:

1. INFORMATION ABOUT THE PERSON(S) FILING THIS RESPONSE:

Name(s): _____ Date(s) of Birth: _____

Address: _____

Occupation(s): _____

My/our relationship to the child(ren) for whom the visitation order is requested:

Mother of the child(ren)

Father of the child(ren)

Other: _____

2. INFORMATION ABOUT ANY OTHER RESPONDENTS NAMED ABOVE

Name(s): _____ Date(s) of Birth: _____

Address: _____

Occupation(s): _____

My/our relationship to the child(ren) for whom the visitation order is requested:

Mother of the child(ren)

Father of the child(ren)

Other: _____

3. INFORMATION ABOUT THE PETITIONER(S)

Name(s): _____ Date(s) of Birth: _____

Address: _____

Occupation(s): _____

Their relationship to the child(ren) for whom the visitation order is requested:

Parent(s) of Mother of the child(ren)

Parent(s) of Father of the child(ren)

Grandparent(s) of Mother of the child(ren)

Grandparent(s) of Father of the child(ren)

Other: _____

4. INFORMATION ABOUT CHILD(REN) FOR WHOM THE VISITATION ORDER IS REQUESTED:

Name: _____

Name: _____

Birth date: _____

Birth date: _____

Current Address: _____

Current Address: _____

Name: _____

Name: _____

Birth date: _____

Birth date: _____

Current Address: _____

Current Address: _____

5. LEGAL REASON WHY PETITIONER(S) SHOULD NOT HAVE VISITATION ORDER:

Mark which applies, if any.

A. Parents of child(ren) HAVE NOT BEEN DIVORCED for at least 3 months:

Date of Divorce: _____ Court case number: _____

Name and location of Court: _____

B. Mother **OR** Father of child(ren) has been dead for at least 3 months:

Date of Death: _____

C. Mother **OR** Father of child(ren) has been missing for at least 3 months:

Date parent discovered to be missing: _____

Date reported to Law enforcement agency: _____

Name, location of agency: _____

D. Child(ren) WERE NOT BORN OUT OF WEDLOCK:

Date of marriage: _____

Place of marriage: _____

E. Petitioner(s)' son/grandson is not the father of the child(ren)

There is a paternity order naming another man as father of child(ren)

Date of paternity order: _____

Court case number: _____

Name of Court: _____

Location of Court: _____

This is why I/we think Petitioner(s)' son or grandson is NOT the father of child(ren):

6. STATEMENTS ABOUT PETITIONER(S)' RELATIONSHIP WITH THE CHILD(REN) FOR THE LAST SIX MONTHS, AND WHY I/WE THINK IT IS NOT BEST FOR THE CHILD(REN) THAT PETITIONER(S) HAVE VISITATION WITH THEM OR WHY LIMITATION ON VISITATION SHOULD BE ORDERED:

7. MY/OUR PLAN FOR VISITATION FOR THE GOOD OF THE CHILD(REN): (be specific)

TRANSPORTATION for visitation will be provided by (name): _____
as follows: _____

WEEKEND visitation will be: _____

SUMMER MONTHS and/or SCHOOL BREAKS will be: _____

HOLIDAYS AND BIRTHDAYS will be: _____

FOR TELEPHONE CALLS: _____

OTHER: _____

OTHER INFORMATION ABOUT THE CHILD(REN):

8. ADDRESSES OF THE CHILD(REN) YOU LISTED IN #3 FOR THE LAST 5 YEARS. (Attach extra pages if necessary.)

Child's Name: _____ Dates: From: _____ To: _____
Lived with: _____ Relationship to child: _____
Address: _____ City, State: _____

Child's Name: _____ Dates: From: _____ To: _____
Lived with: _____ Relationship to child: _____
Address: _____ City, State: _____

Child's Name: _____ Dates: From: _____ To: _____
Lived with: _____ Relationship to child: _____
Address: _____ City, State: _____

Child's Name: _____ Dates: From: _____ To: _____
Lived with: _____ Relationship to child: _____
Address: _____ City, State: _____

9. LEGAL DECISION-MAKING OR VISITATION CASES INVOLVING THE MINOR CHILD(REN):

[] I HAVE [] I HAVE NOT been a party or a witness in court in this state or in any other state involving the legal decision-making or visitation of any of the children named above. (If so, explain below, using extra pages if necessary. **IF NOT, GO ON to #11.**)

Name of child: _____
Court state: _____ Court location: _____
Court case number: _____ Status: _____
How the child is involved: _____
Summary of any court order: _____

10. PENDING LEGAL DECISION-MAKING OR VISITATION CASES RELATED TO MINOR CHILD(REN):

[] I HAVE [] I DO NOT HAVE information about a legal decision-making or visitation court case relating to any of the children named above that is pending in this state or in any other state (If so, explain below, using extra pages if necessary. **IF NOT, GO ON to #12.**)

Name of child: _____
Court state: _____ Court location: _____
Court case number: _____ Status: _____
Nature of the proceeding: _____
Summary of any court order: _____

11. LEGAL DECISION-MAKING OR VISITATION CLAIMS OF ANY PERSON: (Check one box)

I KNOW I DO NOT KNOW a person other than the Petitioner or the Respondent who provides primary physical residence or who claims legal decision-making or visitation rights to any of the children named above. (If so, explain below, using extra pages if necessary. **IF NOT, GO ON to #13**).

Name of each child: _____

Name of person with the claim: _____

Address of person with the claim: _____

Nature of the claim: _____

12. SUMMARY OF WHAT I/WE SAY ABOUT THE CHILD(REN) THAT IS DIFFERENT FROM WHAT THE PETITIONER(S) HAVE REQUESTED:

OTHER STATEMENTS TO THE COURT:

13. VENUE:

This is the proper court to bring this lawsuit under Arizona law because it is the county of residence of the petitioner(s), or the respondent(s), or the child(ren).

This is not the proper court to bring this lawsuit because _____

14. GENERAL DENIAL: I/we deny anything stated in the Petition that I/we have not specifically admitted, qualified, or denied.

REQUESTS MADE TO THE COURT:

1. For visitation as described above.

2. For no visitation as to Petitioner(s).

3. Supervised visitation between the child(ren) and Petitioner(s) is in the best interests of the child(ren), pursuant to A.R.S. §§ 25-409 and 25-410, because:

Suggested person to supervise: _____

The cost of supervised visitation shall be paid by [] the party being supervised;
[] the party having legal decision-making; [] shared equally by the parties.

4. [] For such other orders as this Court considers just and fair.

OATH AND VERIFICATION OF RESPONDENT(S)

STATE OF ARIZONA)
County of _____)

I/we, the Respondent(s), being duly sworn and under oath, state that I/we have read this Response. All the statements in the Response are true, correct and complete to the best of my/our knowledge and belief.

SIGNED: _____

SIGNED: _____

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20____,
By _____.

My Commission Expires:

Notary Public

Copy of this Response mailed to Petitioner(s)

Name _____

Address _____

_____ on _____, 20____

By _____
Respondent(s)