

Your Name: _____
Your Address: _____
Your City, State, Zip Code: _____
Your Telephone Number: _____
Attorney Bar Number (if applicable): _____
Representing Self (Without a Lawyer) OR
 Attorney for _____

SUPERIOR COURT OF ARIZONA YAVAPAI COUNTY

In the Matter of (check one or both)
 Guardianship Conservatorship of

_____ a Minor

STATE OF ARIZONA)
County of Yavapai) ss.

Case Number: _____
**WAIVER OF NOTICE OF HEARING
ON PETITION REGARDING**
(Check one box)
 Guardianship and Conservatorship
 Guardianship
 Conservatorship
 Accounting
 Release of Restricted Funds

I state under oath the following:

1. **RECEIVED COURT PAPERS.** I have received and read a copy of the following Petition and other court papers: (Check the box next to the documents you received.)

- | | |
|---|---|
| <input type="checkbox"/> "Affidavit of Person to be Appointed" | <input type="checkbox"/> "Notice of Hearing Regarding . . ." |
| <input type="checkbox"/> "Petition for Guardianship/Conservatorship" | <input type="checkbox"/> "Discharge Guardianship and/or
Conservatorship/Release Funds" |
| <input type="checkbox"/> "Consent of Parent to Guardianship,
Conservatorship, or Both" | <input type="checkbox"/> "Petition for Approval of Accounting"
<input type="checkbox"/> "Petition for Release of Restricted Funds" |

2. **RELATIONSHIP:** My relationship to the person who is named in the caption above as incapacitated or protected is (explain): _____

3. **WAIVE NOTICE.** I waive all notice of any hearing or court proceeding in connection with 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.

Signature

SUBSCRIBED AND SWORN to before me this date: _____ by _____
(Month/Day/Year)

My Commission Expires: _____

Deputy Clerk/Notary Public