Name of person filing: _____
Mailing Address (if not protected): _____
City, State, Zip Code: _____
Phone Number: _____
Email Address: _____
Representing ☐ Self or ☐ Attorney for _____
If attorney, Lawyer's Bar Number: _____

For Clerk's Use Only

SUPERIOR COURT OF ARIZONA
IN YAVAPAI COUNTY

IN THE MATTER OF:

_____
_____
_____
_____
NAME(S) OF MINOR CHILD(REN)

CASE # S1300SV _____
(To be completed by the Court)

WAIVER BY PARENT OF NOTICE OF HEARING AND APPEARANCE ON PETITION FOR TERMINATION OF PARENT-CHILD RELATIONSHIP

NOTICE: by signing this waiver, you will not be notified of any hearings or proceedings in this matter. Failure to attend hearings will result in the court proceeding in your absence, which may result in the termination of your parental rights.

UNDER OATH or by AFFIRMATION:

INFORMATION FROM PARENT whose rights are to be terminated:

1. I, _____, am the ☐ Mother ☐ Father of the minor child(ren) 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 and address and date of birth is as follows:

Name: _____

Mailing Address: _____

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 by waiving my appearance, the court will proceed in my absence, which may result in the termination of my parental rights.**

4. **I understand that an order terminating the parent-child relationship between myself, and minor child(ren) shall divest me of all legal rights, privileges, duties, and obligations with respect to the minor child(ren), except the right of my child(ren) to inherit from me, and my obligation to pay child support. This right of inheritance and child support obligation shall only be terminated by a final order of adoption.**

_____ _____

Date Signature

STATE OF _____)

)

County of _____)

[Name of County]

SUBSCRIBED AND SWORN (or affirmed) before me this _____ day of _____, 20____

by _____.

[Name of Signer]

[Affix Seal Here] _____

Notary Public/Clerk of Court

My Commission Expires _____