

Your Name: \_\_\_\_\_  
Your Address: \_\_\_\_\_  
Your City, Zip Code: \_\_\_\_\_  
Your Telephone No. \_\_\_\_\_  
Represents  Self OR  Attorney for: \_\_\_\_\_  
State Bar Number (if applicable): \_\_\_\_\_  
Licensed Fiduciary No. (if applicable): \_\_\_\_\_

FOR CLERK'S USE ONLY

## SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the Matter of:

Case Number: PB \_\_\_\_\_

**CONSENT OF PARENT TO** (Check one *or both*)  
 **GUARDIANSHIP and/or**  
 **CONSERVATORSHIP**  
**OF A MINOR CHILD and**  
(OPTIONAL) **WAIVER OF NOTICE**

\_\_\_\_\_  
Name of Minor(s)

### UNDER PENALTY OF PERJURY:

1. **INFORMATION ABOUT ME**, the parent:

**Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Telephone:** \_\_\_\_\_  
**Date of Birth:** \_\_\_\_\_

I am the natural or legally adoptive  **MOTHER** or  **FATHER** of the minor child or children named above, for whom a guardian and/or conservator is to be appointed.

2. I have read the **Petition for Appointment of a Guardian and/or Conservator** and consent to the appointment of: \_\_\_\_\_

as  **Guardian**,  **Conservator**, or  **Guardian and Conservator** of the minor child(ren).

3. (Optional)  **I WAIVE NOTICE OF ALL FURTHER PROCEEDINGS IN THIS MATTER.**

### OATH OR AFFIRMATION

**I swear or affirm that I have read and understood this document and the information I have provided is true and correct to the best of my knowledge and belief.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature

Sworn to or Affirmed before me this: \_\_\_\_\_ by \_\_\_\_\_  
(date)

\_\_\_\_\_  
Parent's Printed Name

My Commission Expires: \_\_\_\_\_  
(or Seal below)

\_\_\_\_\_  
Deputy Clerk or Notary Public