

Court File Number

Provincial Court of Alberta, Court Location _____

Court of Queen's Bench of Alberta, Judicial District of _____

In the Matter of the *Family Law Act*

BETWEEN

Name(s)		Applicant(s)
Address for Service, Phone No.		

and

Name(s)		Respondent(s)
Last known Address, Phone No.		

Claim

I ask the Court to grant the following order(s):

Guardianship

- Guardianship of Child **Statement** G1, G2
- Terminate Guardianship **Statement** G3
- Review of Guardian's Significant Decision **Statement** G4
- Court Direction for Guardian **Statement** G5

Parenting

- Parenting of Child **Statement** P1, P3
- Vary a Parenting Order **Statement** P2

Contact

- Contact with Child **Statement** C1
- Vary a Contact Order **Statement** C2
- Leave of Court (to apply for contact) **Statement** C3
- Other** (specify) _____

Child Support

- Child Support **Statement** CS1
- Vary Child Support Order **Statement** CS2, CS3

Spousal/Partner Support

- Spousal/Partner Support **Statement** S1
- Vary Support Order **Statement** S2, S3

Enforcement (Time with Child)

- Enforcement (Time with Child) **Statement** E1
- Reimbursement for Failure to Exercise Time **Statement** E2
- Vary Enforcement Order **Statement** E3

Matters Available only in Queen's Bench

- Exclusive Possession of Home/Goods **Statement** QB1
- Declaration of Parentage **Statement** QB2
- Declaration of Irreconcilability **Statement** QB3

Children involved in this application: Full name(s) of child(ren) and Birthdate(s) (yyyy/mm/dd)

- 1. _____ 4. _____
- 2. _____ 5. _____
- 3. _____ 6. _____

Have you considered alternative ways of resolving this matter such as mediation? Yes No

Have you been involved in other legal proceedings (past or present) with the Respondent(s) or the children? Yes No

_____ Signature of Applicant or Lawyer	_____ Signature of Applicant or Lawyer	_____ Date	_____ Lawyer's File Number
_____ Print Name of Applicant or Lawyer	_____ Print Name of Applicant or Lawyer		

Notice to Respondent

The Court requires you to attend at _____

on _____, at _____ a.m./p.m.

If you do not attend, the Court may still make an order in your absence. If you wish to respond to the Applicant's Claim, you must file a Response at the courthouse, serve it on the Applicant(s) by _____ and appear at court as noted above.
Date – 5 days before court

Court Stamp

Court File Number

Statement - Contact

STATEMENT C1

Family Law Act

BETWEEN

Name(s)

[Empty box for Applicant(s) Name(s)]

Applicant(s)

and

Name(s)

[Empty box for Respondent(s) Name(s)]

Respondent(s)

Court Stamp

I, _____, swear/affirm that:

If you are a guardian use Statement P1

- 1. I am not a guardian of the child(ren).
- 2. My relationship to the child(ren) is _____
(ie: father, aunt, uncle etc.)

3. Choose one.

- I am a parent of the child(ren).
- I am a person standing in the place of a parent to the child(ren). (describe in paragraph 8 below)
- I am a grandparent of the child(ren) whose contact with the child(ren) has been interrupted by:
 - the separation of the parents which occurred _____
approximate date
 - the death of the _____ who died on _____
father or mother approximate date

Use Statement C3 to apply for leave.

- none of the above, but I have obtained leave of the Court to commence this application.
(attach copy of court order)

4. The child(ren) reside(s) with _____

5. I want the following contact with the child(ren):

- visits (provide dates and times that would be most suitable)

Choose any applicable statements

- oral communication.
- written communication.
- other method of communication (provide specifics):

6. I last had contact with the child(ren) _____
date

Applicant's Name

Court File Number

7. I believe the contact I am applying for is in the child(ren)'s best interests because:
(You may wish to refer to Section 18 of the *Family Law Act* regarding best interests of the child).

8. I believe the Respondent's denial of contact between the child(ren) and me is unreasonable because:

Provide details

9. I have the following other information in support of my application:

Sworn/Affirmed before me

on _____,

at _____, Alberta.

Applicant's Signature

Justice of the Peace or Commissioner for Oaths
in and for the Province of Alberta

Court File Number

Affidavit of Service - Applicant

Family Law Act

BETWEEN

Name(s)

[Empty box for Applicant Name(s)]

Applicant(s)

and

Name(s)

[Empty box for Respondent Name(s)]

Respondent(s)

Court Stamp

I, _____, of _____ city personally served the Respondent with the following forms on _____ date, at _____ address/location

- a copy of the Claim (attached)
- a blank Response
- the following completed Statement(s) of the Applicant (attached)

List titles of Statements attached to this Affidavit of Service. There must be at least a Claim and completed Statement(s) attached.

- the following blank Reply Statement(s) for the Respondent

List titles of blank Reply Statements given to the Respondent

- a written request for financial information (attached)
- the following other document(s) (attached)

Complete only if applicable

List all forms or affidavits included in your package

Sworn/Affirmed before me

on _____,

at _____, Alberta.

Signature

Justice of the Peace or Commissioner for Oaths
in and for the Province of Alberta