

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)		
Address for Service, Phone No.		

Applicant(s)
(as name appears on Claim)

and

Name(s)		
Address for Service, Phone No.		

Respondent(s)
(as name appears on Claim)

Response

1. Select one

I agree with the following order(s) asked for by the Applicant: _____.

I disagree with the following order(s) asked for by the Applicant: _____.
My Reply Statements (attached) provide details.

2. (If applicable) In addition, I ask the Court to grant the following order(s):

Guardianship

Statement

Child Support

Statement

- | | | | |
|--|--------|---|----------|
| <input type="checkbox"/> Guardianship of Child | G1, G2 | <input type="checkbox"/> Child Support | CS1 |
| <input type="checkbox"/> Terminate Guardianship | G3 | <input type="checkbox"/> Vary Child Support Order | CS2, CS3 |
| <input type="checkbox"/> Review of Guardian's Significant Decision | G4 | Spousal/Partner Support | |
| <input type="checkbox"/> Court Direction for Guardian | G5 | <input type="checkbox"/> Spousal/Partner Support | S1 |
| | | <input type="checkbox"/> Vary Support Order | S2, S3 |

Parenting

Enforcement (Time with Child)

- | | | | |
|---|--------|---|----|
| <input type="checkbox"/> Parenting of Child | P1, P3 | <input type="checkbox"/> Enforcement (Time with Child) | E1 |
| <input type="checkbox"/> Vary a Parenting Order | P2 | <input type="checkbox"/> Reimbursement for Failure to Exercise Time | E2 |
| | | <input type="checkbox"/> Vary Enforcement Order | E3 |

Contact

Matters Available only in Queen's Bench

- | | | | |
|--|----|---|-----|
| <input type="checkbox"/> Contact with Child | C1 | <input type="checkbox"/> Exclusive Possession of Home/Goods | QB1 |
| <input type="checkbox"/> Vary a Contact Order | C2 | <input type="checkbox"/> Declaration of Parentage | QB2 |
| <input type="checkbox"/> Leave of Court (to apply for contact) | C3 | <input type="checkbox"/> Declaration of Irreconcilability | QB3 |
| <input type="checkbox"/> Other (specify) _____ | | | |

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 Applicant(s) or the children? Yes No

Signature of Respondent or Lawyer Signature of Respondent or Lawyer Date Lawyer's File Number

Print Name of Respondent or Lawyer Print Name of Respondent or Lawyer

Court Stamp

The Court requires you to attend at _____

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

Reply to Adult's Statement Guardianship of Child

Court File Number

REPLY STATEMENT R-G1

Family Law Act

BETWEEN

Name(s)

Applicant(s)

and

Name(s)

Respondent(s)

Court Stamp

I, _____, swear/affirm that:

1. Choose one.

- I am a guardian of the child(ren). My relationship to the child(ren) is _____.
- I am one of the children.

2. To the best of my knowledge, the current guardians of the child(ren) are:

3. The child(ren) reside(s) with _____
(Name and Relationship to the child(ren))

4. Do not appoint the Applicant as a guardian of the child(ren) because:

Choose all that apply

- the Applicant is not able to be a guardian.
- the Applicant is not willing to be a guardian.
- the Applicant is not suitable to be a guardian.
- other reason(s):

Provide details for any box(es) checked. If insufficient space, attach a separate sheet

Applicant's Name

Court File Number

5. I believe these child(ren) over 12 years of age:

Choose all that apply

do not consent to the Applicant becoming their guardian (list names of child(ren) you believe are not consenting). I have the following reasons to believe they do not consent:

If insufficient space, attach a separate sheet

consent to the Applicant becoming their guardian (list names of child(ren) you believe are consenting). I have the following reasons to believe they consent:

6. I do not believe it is in the best interests of the child(ren) for the Applicant to become a guardian: (You may wish to refer to Section 18 of the *Family Law Act* regarding best interests of the child).

If insufficient space, attach a separate sheet

7. I have the following other information in reply to the Applicant's Claim:

Sworn/Affirmed before me

on _____,
at _____, Alberta.

Respondent's Signature

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

Affidavit of Service Respondent

Court File Number

Family Law Act

BETWEEN

Name(s)

Applicant(s)

and

Name(s)

Respondent(s)

Court Stamp

I, _____, of _____ served the

city

Applicant with the following forms on _____ date _____, by _____ provide details of how you served the documents

- a copy of the Response (attached)
- the following completed Reply Statement(s) of the Respondent (attached)

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

- the following completed Statement(s) of the Respondent (attached)

Complete only if applicable

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

Complete only if applicable

- a written request for financial information (attached)

Complete only if applicable

- the following other document(s) (attached)

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

Applicant's Name

Court File Number



Applicant's Name

Court File Number

