Person Filing: _____
_____
Mailing Address: _____
City, State, Zip Code: _____
Phone Number: _____
Representing Self

SUPERIOR COURT OF ARIZONA, COUNTY OF COCONINO

In the Matter of the Guardianship
Conservatorship of:

Case Number: GC_____

WITHDRAWAL OF CONSENT OF PARENT TO:

Ward 1: _____
Ward 2: _____
Ward 3: _____
A Minor

[ ] GUARDIANSHIP ONLY
[ ] CONSERVATORSHIP ONLY
[ ] GUARDIANSHIP AND CONSERVATORSHIP

This withdrawal of consent concerns Ward: [ ] 1 [ ] 2 [ ] 3.
I am the ward's natural: [ ] mother [ ] father.
My Name: _____
Address: _____
Phone Number: _____ Birthdate: _____

I gave the court my written consent to the ward's: [ ] guardianship [ ] conservatorship.
Now I withdraw that consent.

I have read this Withdrawal of Consent, and it is true and complete to the best of my knowledge.

Parent's Signature: _____

State of Arizona)
)
County of _____)

Subscribed and sworn before me this date: _____ by: _____

Seal:

Notary Public: _____
Notary Expiration Date: _____