

Superior Court of Washington, County of _____

In the Guardianship of:

Respondent/s (*minors/children*)

No. _____

Parent's Consent to Minor Guardianship
(CON)

Parent's Consent to Minor Guardianship

*Use this form to agree to Minor Guardianship. Do **not** use this form for Standby or Emergency Guardianship.*

1. Parent

My name is _____. I am a legal parent of the children named above.

2. Guardian

I agree (consent) that the court can appoint (*name/s*) _____ as guardian for my children.

3. Powers

I have read the *Minor Guardianship Petition*. I agree the court should give the guardian the powers requested in the petition. The petition covers:

- Custody
- Visitation
- Decision-Making Authority
- Access to Records
- Child Support, Insurance, and Taxes
- Protection Orders and Restraining Orders
- Fees and Costs
- Other Requests

4. Voluntary

I do **not have to agree** to this guardianship. I have a legal right to raise my children (unless a court has already limited that right).

5. Lawyer

I understand that I have the right to seek legal advice. If I need help understanding this consent or do **not** agree to a guardian, I can talk to a lawyer.

If I do **not** agree and cannot afford a lawyer, I have the right to have a lawyer appointed to represent me at public expense. (GDN ALL 021, *Motion to Appoint Lawyer.*)

6. Legal Proceeding

I understand that if I do **not** agree, I have the right to a full legal proceeding about guardianship. In a full proceeding, the court must presume I am willing and able to parent. For the Petitioner to succeed, they must prove I am **not** able or willing to parent.

I agree to the guardian being appointed for my children without a full legal proceeding.

7. Termination

I understand that once the court has approved the guardianship, if I want it to end before it expires (usually age 18), I will have to petition the court. (*Use Petition to Terminate or Change Minor Guardianship or Non Parent Custody Order form GDN M 502*) If the guardian does not agree, they will have to prove:

- Ending the guardianship would be harmful to the children; and
- The children's interest in continuing the guardianship outweighs my parental rights.

8. Acceptance of Service

☐ Does not apply.

☐ I have received a copy of the *Minor Guardianship Petition* and accept service.

☐ I do not need to be notified about the court's hearings or decisions in this case.

☐ I ask the Petitioner to notify me about any hearings in this case. (*List an address where you agree to accept legal documents. This may be a lawyer's address or any other address.*)

Address City State Zip

E-mail: _____

I understand the nature and consequences of a minor guardianship. I agree the court can appoint the guardian named above for my children.

► _____
Parent signs here Print name Date

Lawyer Certification (optional)

I am the lawyer for the above-named parent. I have reviewed this Parental Consent with my client. I explained to my client the nature of the proposed guardianship and the consequences of agreeing to the guardianship.

My client has indicated to me they understand the nature and consequences, and still wish to consent to the guardianship.

► _____
Parent's lawyer (if any) signs here Print name and WSBA No. Date