Name

Mailing Address

City, State Zip Code

Phone Number

Email

Respondent (without attorney/advocate)
 Attorney/Advocate for \_\_\_\_\_\_

# IN THE TRIBAL COURT OF THE CONFEDERATED SALISH AND KOOTENAI TRIBES OF THE FLATHEAD RESERVATION, PABLO, MONTANA

IN THE MATTER OF:	
Minor Child(ren).	Cause No
Petitioner(s),	RESPONSE TO PETITION TO ESTABLISH
and	GRANDPARENT VISITATION
Respondent(s).	

**INSTRUCTIONS:** The following corresponds with each numbered paragraph in the Petition. You have the option to either agree or deny each allegation in the Petition. You also have the option to challenge all or part of the information in each paragraph. If you disagree, please use the space in each section to explain your position.

If you need **more space** than is provided, attach additional pages and indicate the corresponding paragraph that goes with the attachment. You must fill out the entire form. If a section does not apply, put "N/A" (not applicable).

I am the Respondent in this action and respectfully respond to the *Petition for Visitation Rights by Grandparent* as follows:

## 1. Petitioner's Information.

□ I agree with the information in the Petition.

 $\Box$  I disagree with the information in paragraph 1 of the Petition and wish to challenge all or part of this information in the Petition. I allege that the correct information is as follows:

# 2. Information about each parent who claims to have legal custody of the minor child(ren).

□ I agree with the information in the Petition.

 $\Box$  I disagree with the information in paragraph 2 of the Petition and wish to challenge all or part of this information in the Petition. I allege that the correct information is as follows:

## 3. Minor Child(ren)'s Information.

□ I agree with the information in the Petition.

 $\Box$  I disagree with the information in paragraph 3 of the Petition and wish to challenge all or part of this information in the Petition. I allege that the correct information is as follows:

# 4. Significant Contacts.

□ I agree with the information in the Petition.

 $\Box$  I disagree with the information in paragraph 4 of the Petition and wish to challenge all or part of this information in the Petition. I allege that the correct information is as follows:

# 5. Grounds for Request

□ I agree with the information in the Petition.

 $\Box$  I disagree with the information in paragraph 5 of the Petition and wish to challenge all or part of this information in the Petition. I allege that the correct information is as follows:

## 6. Other Court Cases

□ I agree with the information in the Petition.

 $\Box$  I disagree with the information in paragraph 6 of the Petition and wish to challenge all or part of this information in the Petition. I allege that the correct information is as follows:

## 7. Best Interests of Child(ren)

□ I agree with the information in the Petition.

□ I disagree with the information in paragraph 7 of the Petition and wish to challenge all or part of this information in the Petition. I allege that the correct information is as follows:

# 8. Proposed Grandparent Visitation/Contact.

□ I agree with the information in the Petition.

 $\Box$  I disagree with the information in paragraph 8 of the Petition and wish to challenge all or part of this information in the Petition. I allege that the correct information is as follows:

# 9. Duration of Grandparent Visitation

□ I agree with the information in the Petition.

 $\Box$  I disagree with the information in paragraph 9 of the Petition and wish to challenge all or part of this information in the Petition. I allege that the correct information is as follows:

#### **10. Request for Hearing**

□ I agree with the information in the Petition.

 $\Box$  I disagree with the information in paragraph 10 of the Petition and wish to challenge all or part of this information in the Petition. I allege that the correct information is as follows:

## **11. Additional Relief**

I request that the Court:

By checking this box, I am	acknowledging I am	۱ filling in the blank	ts and <u>not</u> changing
anything else on the form.			

By checking this box, I am acknowledging that I have made a change to the original content of this form.

RESPECTFULLY submitted this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_ by:

Signature of: DRespondent
Attorney/Advocate for

## VERIFICATION AND ACKNOWLEDGMENT

I, \_\_\_\_\_, swear/affirm under penalty of perjury that I have read the foregoing document and that the information provided set forth therein is true and correct to the best of my knowledge.

Signature

Date

Subscribed and sworn to or affirmed before me at \_\_\_\_\_\_, Montana on the \_\_\_\_\_ day of \_\_\_\_\_\_.

(SEAL)

Clerk of Court, Notary Public or other person authorized to administer oath.

My commission expires:

# **CERTIFICATE OF MAILING**

I, \_\_\_\_\_, do hereby certify that I mailed a true and accurate copy of the **RESPONSE** to the opposing parties on this \_\_\_\_ day of \_\_\_\_\_, 20 , at the addresses given below.

Signature