

**IN THE CHILDREN'S COURT
OF NEW SOUTH WALES
AT**

CASE NUMBER

Registration of alternative parenting plan

Section 119(3) Children and Young Persons (Care and Protection) Act 1998

Children or young persons

Name

Date of birth

Address

Consent details

I am a party to the attached alternative parenting plan.

1. I have been advised that it is desirable to seek legal advice about changes to the allocation of parental responsibility.
 I have received legal advice.
 I do not wish to obtain legal advice.
2. I understand the alternative parenting plan, I have agreed to the alternative parenting plan and I agree to the alternative parenting plan being registered in the Children's Court of New South Wales.

Signature

Child or young person

Signature

Name

Date

Details of the person who provided legal advice

Name

Address

Telephone

Fax

Email

Other parties

Name

Address

Position or relationship
to child or young person

Signature

Details of the person who provided legal advice

Name

Address

Telephone

Fax

Email

Other parties

Name

Address

Position or relationship
to child or young person

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[Note: This form MUST accompany Form 2 – Application other than Form 1]