Form FL‑66

Clerk’s Stamp

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| COURT FILE NUMBER |       |
| COURT |

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COURT OF JUSTICE

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COURT OF KING’S BENCH |
| JUDICIAL CENTRE (KING’S BENCH) |       |
| COURT LOCATION (COURT OF JUSTICE) |       |
| APPLICANT(S) |       |
| RESPONDENT(S) |       |
| DOCUMENT | **REPLY STATEMENT – LEAVE OF COURT (TO APPLY FOR CONTACT)** |

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| ADDRESS FOR SERVICE ANDCONTACT INFORMATION OFPARTY FILING THIS DOCUMENT |       |

I, [name], swear/affirm that:

|  |  |
| --- | --- |
| 1. | I am a guardian of the child(ren). |
|  |  |
| 2. | My relationship to the child(ren) is [father, aunt, etc.] |
|  |  |
| 3. | The child(ren) live(s) with      . |
|  |  |
| 4. | I limit the amount of contact the Applicant has with the child(ren) because: |
|  | [specify] |
|  |  |
| 5. | I believe it would be in the best interests of the child(ren) for the Court to refuse to allow the  |
|  | Applicant to make an Application for Contact because: |
|  | (You may wish to refer to section 18 of the Family Law Act regarding best interests of the child.) |
|  |  |
| 6. | I have the following other information in reply to the Applicant’s Claim: |
|  | [specify] |

|  |  |  |
| --- | --- | --- |
| Sworn/Affirmed before me on [date], 20[year] at [city], Alberta.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Justice of the Peace or Commissioner for Oaths in and for the Province of Alberta | )))))))))) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Respondent’s Signature |