



## PUEBLO OF LAGUNA COURT CIVIL COVER SHEET

This document is CONFIDENTIAL, and shall not be disclosed to the public. The purpose of this document is to assist the Court in keeping accurate records and making sure that we notify the correct parties of upcoming Court hearings.

Because you started this legal action, **you are called the Petitioner(s)**. The person(s) that you are bringing the action against **are called the Respondent(s)**.

**Note:** It is important that all information is filled in accurately or to the best of your knowledge. unfilled information only delays the Court process.

### **PETITIONER:**

Name: \_\_\_\_\_ DOB: \_\_\_ / \_\_\_ / \_\_\_ Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Tribal Affiliation: \_\_\_\_\_ Enrollment #: \_\_\_\_\_ Phone# (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

### **PETITIONER:**

Name: \_\_\_\_\_ DOB: \_\_\_ / \_\_\_ / \_\_\_ Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Tribal Affiliation: \_\_\_\_\_ Enrollment #: \_\_\_\_\_ Phone# (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

### **RESPONDENT:**

Name: \_\_\_\_\_ DOB: \_\_\_ / \_\_\_ / \_\_\_ Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Tribal Affiliation: \_\_\_\_\_ Enrollment #: \_\_\_\_\_ Phone# (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

### **RESPONDENT:**

Name: \_\_\_\_\_ DOB: \_\_\_ / \_\_\_ / \_\_\_ Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Tribal Affiliation: \_\_\_\_\_ Enrollment #: \_\_\_\_\_ Phone# (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

**IN THE PUEBLO COURT  
PUEBLO OF LAGUNA**

**IN THE MATTER OF:**

\_\_\_\_\_, **MINOR(s)**

**CASE NO.** \_\_\_\_\_

\_\_\_\_\_  
**Petitioner(s),**

**v.**

\_\_\_\_\_  
**Respondent(s).**

**PETITION TO ENFORCE / OBTAIN VISITATION RIGHTS**

Comes now Petitioner(s), \_\_\_\_\_, and states the following:

- 1) That the Laguna Pueblo Court has jurisdiction over the subject matter herein.
- 2) I, \_\_\_\_\_ am the ( ) mother, ( ) father, ( ) grandparent(s) of my ( ) child(ren) or ( ) grandchild(ren).
- 3) List the name(s) and age(s) of the minor child(ren) or grandchild(ren):

<u>Name(s)</u>	<u>Date of Birth</u>
_____	____/____/____
_____	____/____/____
_____	____/____/____
_____	____/____/____

4) I, (Petitioner(s) currently reside at \_\_\_\_\_, (city/village). I am / I am not an enrolled member of the \_\_\_\_\_ (Pueblo / Tribe).

5) Respondent(s) currently reside at \_\_\_\_\_ (city/village) and is / is not an enrolled member(s) of the \_\_\_\_\_ (Pueblo / Tribe).

6) Currently my / our ( ) child(ren), ( ) grandchild(ren), ( ) mother, ( ) father, ( ) grandparent(s) reside at \_\_\_\_\_ (city / village) and enrolled member(s) of \_\_\_\_\_ (Pueblo / Tribe).

7) Why do you feel you need the Court to intervene with visitation rights? (please explain below):

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8) Is there a current court case open? What was the outcome? Are there any charges or pending investigation(s) that will prohibit you from seeing the minor child(ren)? (please explain below):

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I, state that the information contained in this Petition is true and accurate to the best of my knowledge and belief.

Respectfully Submitted,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone # ( ) \_\_\_\_\_