Consent to Act as Litigation Guardian and Certificate of Fitness

REGISTRY FILE NUMBER
REGISTRY LOCATION

IN THE PROVINCIAL COURT OF BRITISH COLUMBIA (Small Claims Court) $\,$

BETWEE	N:						CLAIMANT		
	NAME	NAME							
	ADDRESS								
	CITY TOWN	I, MUNICIPALITY		PROV.	POSTAL CODE	TEL. #			
AND:	on i, rown	, MONION ALIT		THOV.	TOSTAL CODE	122. #	DEFENDANT		
AND:	NAME						DEFENDANT		
	ADDRESS								
	OLTY TOWN	, MUNICIPALITY		2201		TEL.#			
	CITT, TOWN	I, MUNICIPALITY		PROV.	POSTAL CODE	IEL.#			
ı									
I,									
of									
Address									
make oath	n and say or sole	mnly affirm as fo	ollows:						
1.	THAT I am of the claimant	☐ Father	☐ Mother	☐ Legal Guardia	n 🗆 An adult v	willing to act as th	ne litigation guardian		
2.	THAT the claim	nant is an infant.							
3.	THAT I have no	o interest in the	matters in question	on in this action adv	erse to that of the sa	id infant.			
4.	THAT I am of the	AT I am of the age of majority, and reside in the province of British Columbia.							
5.	THAT I am a fit	HAT I am a fit and proper person to be litigation guardian of the said infant Claimant.							
6.	THAT I agree t	o assist the infar	nt in this action.						
at	AFFIRMED befor	re me							
LOCATION		'alumbia		}		Signature of Litigation Gu	ardian		
in the Pro	vince of British C	olumbia							
on									
DATE				J					
•	Signature	of a Commissioner for the Province of British							

SCL 807 12/2006 **REGISTRY**

Registry No.	
Registry	

IN THE PROVINCIAL COURT OF BRITISH COLUMBIA (Small Claims Court)

BETWEEN:	CLAIMANT
AND:	DEFENDANT
AFFIDAVIT OF ATTAINMENT OF N	MAJORITY
$1, {Name}$, ${Occu}$	pation
of	
Province of British Columbia, MAKE OATH AND SAY (OR AFFIRM) AS FOLL	
I attained the age of majority on	·
2. I am under no other legal disability.	
3. I intend to act in this action without a litigation guardian.	
Sworn/affirmed before me in the City of	British Columbia
on _{Date}	
A Commissioner for taking Affidavits within British Columbia	Deponent