



CONSENT TO ACT AS GUARDIAN AD LITEM AND CERTIFICATE OF FITNESS

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

REGISTRY FILE NUMBER
REGISTRY LOCATION

BETWEEN:

CLAIMANT

NAME _____
 ADDRESS _____
 CITY, TOWN, MUNICIPALITY _____ PROV. _____ POSTAL CODE _____ TEL. # _____

AND:

DEFENDANT

NAME _____
 ADDRESS _____
 CITY, TOWN, MUNICIPALITY _____ PROV. _____ POSTAL CODE _____ TEL. # _____

I, _____
Name

of _____
Address

make oath and say or solemnly affirm as follows:

1. THAT I am Father Mother Legal Guardian An adult willing to act as the litigation guardian of the claimant in this action.
2. THAT the claimant is an infant.
3. THAT I have no interest in the matters in question in this action adverse to that of the said infant.
4. THAT I am of the age of majority, and reside in the province of British Columbia.
5. THAT I am a fit and proper person to be guardian "ad litem" of the said infant Claimant.
6. THAT I agree to assist the infant in this action.

SWORN/AFFIRMED before me

at _____
LOCATION
in the Province of British Columbia

on _____
DATE

} _____
Signature of Guardian ad Litem

Signature of a Commissioner for taking Affidavits within
the Province of British Columbia

