

## CONSENT TO ACT AS GUARDIAN AD LITEM AND CERTIFICATE OF FITNESS

REGISTRY FILE NUMBER
REGISTRY LOCATION

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

<b>BETWEEN:</b>		CLAII							
		NAME							
		ADDRESS							
		CITY, TOWN, MUNICIPALITY		PROV.	POSTAL CODE	TEL.#			
AND:		on i, rom, monon ner		THOY.	1 OOME OODE		ENDANT		
AND.		NAME				DEF	ENDANI		
		ADDRESS							
		CITY, TOWN, MUNICIPALITY		PROV.	POSTAL CODE	TEL.#			
Name									
of									
Address									
make oatl	h and sa	ay or solemnly affirm as for	ollows:						
1.	THAT of the	I am ☐ Father claimant in this action.	☐ Mother	☐ Legal Guardian	☐ An adult willing	to act as the litigation g	uardian		
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 majori	ty, and reside in	the province of British C	h Columbia.				
5. THAT I am a fit and proper person to be guardian "ad litem" of the said i					infant Claimant.				
6.	THAT	I agree to assist the infa	nt in this action.						
at		ED before me							
LOCATION		British Columbia			Signatu	re of Guardian ad Litem			
iii tiie i io	WILLOG OI	Dittisti Columbia							
on				J					
DATE				•					
		Signature of a Commissioner for the Province of British							

Registry No.	
Registry	

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

BETWEEN:		CLAIMANT
AND:		DEFENDANT
AFFIDAVIT OF ATTAINMENT	OF MAJORITY	
I, Name	Occupation	· ,
Of	,	
Province of British Columbia, MAKE OATH AND SAY (OR AFFIRM) AS	FOLLOWS:	
I attained the age of majority on  Date	·	
2. I am under no other legal disability.		
3. I intend to act in this action without a guardian ad litem.		
Sworn/affirmed before me in the City of		British Columbia
on <sub>Date</sub>		
A Commissioner for taking Affidavits within British Columbia	Deponent	