## Mail Application to:

Probate and Family Court Administrative Office John Adams Courthouse One Pemberton Square Mezzanine Boston, MA 02108 attn. fee gen.

## Application to the Probate and Family Court Department for appointment as

## Guardian ad Litem

for

Child Performers — G.L. c. 231, § 85P1/2

For court use only				
Reviewed				
Entered				

Name:	(Street and N	umber\			
Firm Name:	(Street and N	umber)			CATEGOR
i iiii ivailie.	(Street and No	umber)			
Address:		(St	treet and Number)		
		·	,		
		(City or Town)		, ,	Zip Code)
Telephone No.	(Area Code)			B.B.O. # _	
E-Mail Address					
I certify that I wa that I remain in go been convicted o	ood standing to pra	ctice before the Su actice before the c	upreme Judicial C courts of the Comr	ourt on nonwealth of Mas	sachusetts, and that I have not
I further certify					
□ that I have entertainers	-	rs of experience a	s an attorney dra	fting and negotiat	ing contracts for performers or
□ that I am fa	miliar with the pro	visions of G.L. c.	231, § 85P½, <b>an</b> d	d	
□ that I have t § 85P½ (4)		ience and expertis	e to serve as a gu	ardian <i>ad litem</i> for	a child pursuant to G.L. c. 231,
I have currently i	n effect professio	nal liahility insurar	nce with coverage	of \$100 000 or n	nore. The insurance company
which issued the		na naomity modrai	ice with coverage	. 01 \$100,000 01 11	nore. The insurance company
			(Name of Company)		
The policy numb	er is:		(Policy Number)		
The limits of liab	ility are:				
	,		(Limits of Liability)		
I request and I <b>W</b> Court Departmer		ntments from the f	following (not mor	e than <b>four</b> ) divisi	ions of the Probate and Family
□ Barnstable	□ Berkshire	☐ Bristol	□ Dukes	□ Essex	□ Franklin □ Hampden
□ Hampshire	□ Middlesex	□ Nantucket	□ Norfolk	□ Plymouth	☐ Suffolk ☐ Worcester
					ntinuing legal education in the
					opointed as a guardian ad litem
					iability insurance, I will provide nust mail to the List Coordinator
		of my good stand			
I have attached	to this Application	o a conv of my re	soums and a sor	tificate of my go	od standing with the Supreme
		s issued not more			od standing with the Supreme
I certify under the	e penalties of perj	ury that all of the a	above information	is true.	
Date:					
= • • • • • • • • • • • • • • • • • • •		-	-	(Signatu	re of Applicant)