OR	ZED AND VERIFIE	D CONSENT	Docket No.	Т	ealth of Massachusetts ne Trial Court e and Family Court
In the Intere	sts of:				Division
First	Name Middle Nar	me Last	Name		
Minor					
I,	First Name	Middle Name	–L;	ast Name (fu	ll name of minor) am 14
years of age	or older and I:				
Conse	nt to the appointment of				
	-	First Name		M.I.	Last Name
(full na	me) as my guardian(s) pur	suant to G.L. c. 190	B,§ 5-203.		
🗌 Do no	t consent to the appointme		- irst Name		Last Name
(full na	me) as my guardian(s) pur				Latinano
,	, , , , , , , , , , , , , , , , , , , ,		Ū		
Nomin	ate				(full name), as my
	First Name		M.I.	Last Name	(**********
	rm under oath that I have r				t the statements set forth
therein are		read the foregoing C			t the statements set forth
	rm under oath that I have r	read the foregoing C			
therein are	rm under oath that I have r	read the foregoing C		nation by Minor and tha	
therein are	rm under oath that I have r	read the foregoing C		nation by Minor and tha Signature	of Minor
therein are	rm under oath that I have r	ead the foregoing C st of my knowledge. –	consent or Nomi	nation by Minor and tha Signature (Address) (City/Town)	of Minor (Apt, Unit, No. etc.)
therein are	rm under oath that I have r true and correct to the bes	ead the foregoing C st of my knowledge. –	consent or Nomi 	nation by Minor and tha Signature (Address) (City/Town) ry Phone #:	of Minor (Apt, Unit, No. etc.) (State)(Zip)
therein are	rm under oath that I have r true and correct to the bes	read the foregoing C at of my knowledge. 	onsent or Nomi	nation by Minor and tha Signature (Address) (City/Town) ry Phone #: Date	of Minor (Apt, Unit, No. etc.) (State) (Zip)
therein are Date On this	rm under oath that I have r true and correct to the bes 	ead the foregoing C at of my knowledge. NOTA	consent or Nomi	nation by Minor and tha Signature (Address) (City/Town) ry Phone #: Date	of Minor (Apt, Unit, No. etc.) (State) (Zip) personally appeared
therein are Date On this	rm under oath that I have r true and correct to the bes	ead the foregoing C st of my knowledge. 	consent or Nomi Prima RIZATION through satisfa	nation by Minor and tha Signature (Address) (City/Town) ry Phone #: Date Date	of Minor (Apt, Unit, No. etc.) (State) (Zip) personally appeared fication, which was
therein are Date On this before me, th	rm under oath that I have r true and correct to the bes , ss day of he undersigned notary publ	ead the foregoing C st of my knowledge. 	consent or Nomi Prima RIZATION through satisfa	nation by Minor and tha Signature (Address) (City/Town) ry Phone #: Date Date	of Minor (Apt, Unit, No. etc.) (State) (Zip) personally appeared fication, which was
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therein are Date On this	rm under oath that I have r true and correct to the bes , ss day of he undersigned notary publ	ead the foregoing C st of my knowledge. 	consent or Nomi Prima RIZATION through satisfa	nation by Minor and tha Signature (Address) (City/Town) ry Phone #: Date Date nctory evidence of ident me is signed on the pre	of Minor (Apt, Unit, No. etc.) (State) (Zip) personally appeared fication, which was ceding or attached documer
therein are Date On this before me, th	rm under oath that I have r true and correct to the bes , ss day of he undersigned notary publ	ead the foregoing C st of my knowledge. 	consent or Nomi Prima RIZATION through satisfa	Anation by Minor and that Signature (Address) (City/Town) ry Phone #: Date Date inctory evidence of ident me is signed on the pre Signature of Notary	of Minor (Apt, Unit, No. etc.) (State) (Zip) personally appeared fication, which was ceding or attached documer Public