Complete ONLY the caption at the top of this form.

Note: If there is more than one Respondent in this case, you must serve each Respondent with a copy of the Petition, Summons and any other documents that you have filed with the Court.

☑ District Court ☐ Denver Juvenile Court	
Pueblo County, Colorado	
Court Address: 501 N. Elizabeth, Room 116 Pueblo, CO 81003	
In re the Parental Responsibilities concerning:	▲ COURT USE ONLY
Petitioner: Willy John Wonka & Mary Jane Wonka (Grandparent(s) names and	Case Number:
Respondent: John doe & Jane Doe (Parent(s) names	Division Courtroom
WAIVER AND ACCEPTANCE OF SERV	/ICE
This form to be completed by Respondent, only if wa	iving service.
I declare under oath that I am the Respondent in this case, that I have received and acces of the Petition, and if applicable the Case Management Order, Notice of Initial Status Sworn Financial Statement and Other (Please identify):	· · · · · · · · · · · · · · · · · · ·
☐This waiver of service shall not be construed as an admission by me of the truth of the allegations in the Petition and I reserve the right to receive notices of settings and the right to respond and appear in person.	
Note: If you are in the active military service of the United States of America, you may suspension of these proceedings under the Servicemembers Civil Relief Act (50 U.S.C. your base legal officer or the attorney of your choice.	
☐I have decided to waive the stay provisions of the Servicemembers Civil Re well as my right to court-appointed counsel under the Act and permit the actio shall not be construed as an admission by me of the truth of the allegations in the	n to proceed. This waiver of service
☐ By checking this box, I am acknowledging I am filling in the blanks and not changing a	anything else on the form.
☐ By checking this box, I am acknowledging that I have made a change to the original c	ontent of this form.
VERIFICATION AND ACKNOWLEDGEMENT I swear/affirm under oath that I have read the foregoing Waiver and Acceptance of Service and that the statements set forth therein are true and correct to the best of my knowledge.	
The respondent parent can sign Waiver if willing to accept paperwork without personal service. Signature must witnessed by a Court Clerk or Notary Public.	
(Printed name of Respondent) Signature of Respo	ndent Date
Address Phone number	
Subscribed and affirmed, or sworn to before me in the County of, this day of, 20	, State of
My Commission Expires:	Dublic/Olada
Notary IDE 1414(a) P3 18 WAIVER AND ACCEPTANCE OF SERVICE	Public/Clerk