Plaintiff	: No. CP-31-CV
VS.	:
	:
	: CIVIL ACTION – CUSTODY
, Defendant	:
	SELF-REPRESENTED PARTY PURSUANT TO Pa.R.C.P. 1930.8
To the Prothonotary:	
Please enter my appearance as a self-represented p	party.
1. I am the ☐ Plaintiff, ☐ Defendant, or ☐ O	ther in the above captioned action.
2. This is a \square custody, \square divorce, \square support	, \square protection from abuse, or \square paternity case.
3. Select from one of the following three option	ns, a, b, or c:
a.	ey representing me, I have decided not to hire an attorney to ting myself in this case.
b. record and I want to terminate the I will provide notice to my attorned.	is my attorney of e services of my attorney and proceed as a self-represented party.
and my attorney acknowledges h	a self-represented party (sign), is/her withdrawal as my attorney of record in this case.
be served, and a telephone number through which provide need not be your home address and phone	address where you agree that pleadings and other legal papers may you may be contacted. The address and phone number that you number. If this is a protection from abuse (PFA) case or other case d phone number is essential, please use an alternate address and nd contacted by telephone.
Papers may be served at the address set forth below	W:
Name of Party	Home Phone Number – include area code
Street Address	Cell Phone Number – include area code
City State Zip	Code Fax Number (optional) – include area code

5. I understand that I must file this form in the Prothonotary's Office and that I must file a new form every time my address or telephone number changes. Please see Pennsylvania Rule of Civil Procedure 1930.8 for more information.			
DATE	SIGNATURE		

Plaintiff	: No. CP-31-CV		
VS.	:		
, : Defendant :	: CIVIL ACTION – CUSTODY		
NOTICE AND ORDER TO	APPEAR FOR CIVIL CONTEMPT		
TO:			
Respondent's Name			
Legal proceedings have been brought	t against you alleging you have willfully		
disobeyed the provisions of the Order of Cou	urt datedin		
the above-captioned action. (Date of Court Order disobeyed)			
If you wish to defend against the clain not required to file in writing with the Court	m set forth in the following pages, you may but are your defenses and objections.		
Whether or not you file in writing with the Co	ourt your defenses or objections, you must appear for a		
conference before the Court in Courtroom No	, at the Huntingdon County Courthouse,		
Huntingdon, Pennsylvania, on the day of_	, 20 at o'clockm.		
IF YOU DO NOT APPEAR IN PE FOR YOUR ARREST.	RSON, THE COURT MAY ISSUE A WARRANT		

If the Court finds that you have willfully failed to comply with its Order of Court, you may be found to be in contempt of court and committed to jail, fined or both.

No party may make a change in residence of any child which significantly impairs the ability of the other party to exercise custodial rights without first complying with all the applicable provisions of 23 Pa. C.S. § 5337 and Pa.R.C.P. 1915.17 regarding relocation.

YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO NOT

HAVE A LAWYER, GO TO OR TELEPHONE THE OFFICE SET FORTH BELOW. THIS OFFICE CAN PROVIDE YOU WITH THE INFORMATION ABOUT HIRING A LAWYER. IF YOU CANNOT AFFORD TO HIRE A LAWYER, THIS OFFICE MAY BE ABLE TO PROVIDE YOU WITH INFORMATION ABOUT AGENCIES THAT MAY OFFER LEGAL SERVICES TO ELIGIBLE PERSONS AT A REDUCED OR NO FEE.

COURT ADMINISTRATOR HUNTINGDON COUNTY COURTHOUSE 223 PENN STREET HUNTINGDON, PA 16652 (814) 643-5078 AMERICANS WITH DISABILITIES ACT OF 1990

The Court of Common Pleas of Huntingdon County, Pennsylvania is required by law to comply with the Americans with Disabilities Act of 1990. For information about accessible facilities and reasonable accommodations available to disabled individuals having business before the Court, please contact our office. All arrangements must be made at least 72 hours prior to any hearing before the Court. You must attend the scheduled conference or hearing.

	BY THE COURT	
DATE:		
	Judge	

Plaintiff	: No. CP-31-CV	
VS.	:	
	:	
	: CIVIL ACTION – CU	ISTODY
, Defendant	·	,61021
Defendant	•	
DECUCIO	NI EOD CIVII. COMPEMBE	
	N FOR CIVIL CONTEMPT	n.
<u>FOR DISOBEI</u>	<u>DIENCE OF CUSTODY ORDEI</u>	<u>K</u>
	s in your case require the Court's in	nmediate attention,
please check "Yes" in the box below. If	f not, please check "No":	
Emergency Order Requested Y	Yes □ No □	
Name of Petitioner	, represei	nting myself, state that:
Name of Petitioner		<i>C</i> , ,
1. I,Name of Petitioner	, Petiti	oner, currently reside at
Name of Petitioner		
Address, including City.	State, Zip and County	·
	,,	
2. I am the \square mother, \square father, or \square		of:
Sta	ate the Relationship (for example, grandparent)	
Initials of Minor	Current Age	
Initials of Minor	Current Age	
initials of Minior	Current Age	
Initials of Minor	Current Age	
Initials of Minor	Current Age	
Initials of Minor	Current Age	

**** Please include full name on the Confidential Information Form and attach to this document.

3	is the \Box mother, \Box father,
Respondent	
Or State the Relationship (for example, grandparent)	of the child(ren), and resides at
Address includio	ng City, State, Zip and County
Address, including	g City, State, 21p and County
4. An Order of Court was entered on	, in the Court of Common Pleas of
County, in the State	of, granting me
Name of County	Name of State
□ legal custody, □ physical custody, or □ other, o	f the child(ren). A true and correct copy of the
Order of Court is attached.	
5. The Respondent has violated the Order in the	following way:
6. I last visited with the child(ren) on	
7Respondent's Name	is now in contempt for failing to obey the Order
dated	
8. Request for Emergency Order	
The following emergency situation requir	es immediate attention by the Court.
Describe this situation in detail:	

9. Emergency (Contact Information:	
Plain	iff:	
Telep	hone Number:	
Defe	ndant number 1:	
Telep	hone Number:	
Defe	ndant number 2:	
Telep	hone Number:	
	in contem	pt, enforce custody, and order any other
Respondent's Name		
appropriate relief rel	ating to custody with the child(ren), i	including:
		_
	<u>VERIFICATION</u>	<u>N</u>
understand that false	the statements made in the foregoing statements herein are made subject t lating to unsworn falsification to auth	o the penalties of perjury of
Date:		
	Signature	

Plaintiff	: No. CP-31-CV
VS.	:
	: : CIVIL ACTION – CUSTODY
, Defendant	:
·	DAVIT OF SERVICE ERTIFIED MAIL)
	e Entry of Appearance, Notice and Order to Appear for ntempt, which were previously filed with the Court,
	los contificados el
Name of person served	on Date served (date return receipt signed) by certified mail,
restricted delivery, return receipt requeste	ed. The original return receipt signed by
Name of person served	is attached.
	n the foregoing document are true and correct. I e made subject to the penalties of perjury of sification to authorities.
Date:	
	Signature of person certifying service
	Name of person certifying service (printed or typed)
	Street Address of person certifying service
	City State Zip Code
	Area Code Telephone Number of person certifying service

Plaintiff	: No.	CP-31-CV	
vs.	:		
	:		
	, : CIV	IL ACTION – CUSTOD	PΥ
Defendar	nt :		
	AFFIDAVIT OF SE		
	copy of the Entry of Appe		
Civil Contempt, and Petition for			
uponName of person served	on	, at	M.
		Time	
at Street Address	City	State	Zip Code
by handing copies thereof to R	-		•
I verify that the statement anderstand that false statement 8 Pa.C.S. § 4904 relating to understand the statement between the statement of the	<u> </u>	to the penalties of perjui	
Juic	Signature of pers	son certifying service	
	Name of person	certifying service (printed or typed)	
	Street Address o	f person certifying service	
	City	State Zip Code	
	Area Code T	Calanhona Numbar of parson cartifyi	ng sarvica