

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF IMPERIAL 939 W. Main Street El Centro, CA 92243	
PETITIONER: RESPONDENT:	
PETITION FOR JOINDER (Custody/Visitation)	CASE NUMBER: _____

Claimant alleges as follows:

1. Claimant's relationship to the following minor child(ren) is: _____

	Child's Name	Birth Date	Age	Gender
a.				
b.				
c.				
d.				

To list any other minor child(ren), attach form MC-020 or attach a sheet of paper and write Additional Minor Child(ren). Check here if you attach another page

2. Each child named above is currently living with:

- Petitioner
 Respondent
 Other (specify) _____ in _____ County.

3. Claimant requests that the court grant the following orders:

- a. Reasonable visitation with the following children as set forth on Child Custody and Visitation Application Attachment – Judicial Council Form (FL-311).
 b. Custody of the following children as set forth on Child Custody and Visitation Application Attachment – Judicial Council Form (FL-311).
 c. Other: _____

4. A completed Declaration Under Uniform Child Custody Jurisdiction & Enforcement Act – Judicial Council Form (FL-105) is attached.

I declare under penalty of perjury, under the laws of the State of California, that the foregoing is true and correct, and that this declaration was signed at _____, California.

Date: _____

Signature: _____

Print Name: _____