

## Instructions for Petition for Order for Protection

This form is used to start a domestic violence protection order case. You can ask for advocate services to help you fill out this form. This form will be:

- Filed as a public court record and will start a civil court case.
- Served (personal delivery) to the person from whom you need protection.

This information in the petition is used by the court to determine if:

- The court has authority to enter an order on your behalf.
- If the relationship between you and the other party meets the legal definition of family or household member.
- If the respondent's behavior towards you meets the legal definition of domestic violence.

This is a two-step process. This form is used to request both immediate temporary protection *and* full protection. If you need immediate protection, and the court finds an emergency exists, the court may immediately issue a temporary order that will last until the court holds a hearing.

**Please print clearly using blue or black ink.**

### Top of the form (Page 1)

Fill in your name (first, middle initial, last) as the "Petitioner." The person you want protection from is the "Respondent." Fill in the respondent's name (first, middle initial, last).

### Who Needs Protection (Question 1)

The court must know who needs protection. Check the first box if you need protection. Check the second box if someone in your family or household needs protection. You may check both boxes.

### Residency (Question 2)

The court needs to know where you live to determine if the court can issue a protection order. Check **ONE** of the boxes to tell the court about where you currently live.

### Age (Question 3)

The court needs to know the ages of the petitioner/victim and the respondent. Check **one** of the boxes for the respondent's age.

### Relationship (Question 4)

The court must know the relationship between the petitioner/victim and the respondent. Check all the boxes that describe your situation.

### Identification of Minors (Question 5)

- If you there are no children, check the box indicating “No Minors Involved.”
- If there are children, list each child’s name, age, race, and sex. Fill in how that child is related to you (for example, son, stepdaughter). Fill in how that child is related to the respondent. Fill with whom that child lives (for example: me, grandparent, or respondent).
- The same information is required for any other family members that need protection too.

### Court Cases (Question 6)

This may not be the first court proceeding involving you, or the minors, and the respondent. The court will need to know about other cases, such as divorce, parentage or criminal, or other restraining, protection or no-contact orders so the court does not issue an order that might conflict with an order from another court.

If there are other cases or orders involving you, or the minors, and the respondent, list the case title (the parties’ names), the case number (if you know it), and the court (tribal, district, municipal, or superior) and the county in the columns provided.

### Request for Protection (Page 2)

In this section, you must tell the court what you want the court to order now and after the hearing (the relief requested). The court can only grant the relief you request in the petition.

Some provisions allow you to ask the court to protect you, all the minors listed in paragraph 5 or only minors you name. Some provisions allow you to specify which locations you want included in the protection. Be sure to check the boxes to specify which people and places you want protected within each restraint provision.

1. The first provision asks the court to **restrain** the respondent from causing physical harm, or from stalking or harassing you and/or the children you name.
2. The second provision asks the court to restrain the respondent from harassing, following, keeping under surveillance, including cyber stalking, or from using telephonic, audiovisual or other electronic means to monitor the actions, locations or communications of you and/or the minors listed in paragraph 5, only the minors you name in this provision. You may also ask for protection in this provision for the victim’s adult children and/or any of the victim’s household members. Write in the names of the adult children or household members in the space provided.
3. The third provision asks the court to **restrain** the respondent from contacting you and/or the children you name.
4. The fourth provision asks the court to **exclude** the respondent from your home, workplace, school or the minor’s day care or school. If there is someplace else you want to include, add it the box called “other.”

You have a right to keep your residential address confidential (secret). This restraint provision in the temporary order and in the full order has a space for you to write in your residential address.

You are not required to write in your residential address if you are concerned with your safety or with identity theft. However, enforcement of the order may be easier if your address is included. If you decide to include your address, please list the complete address, including city.

5. The fifth provision asks the court to order the respondent to **vacate** (leave) the home the two of you share and to give you exclusive rights to the home.
6. The sixth provision asks the court to **prohibit** the respondent from knowingly coming within or knowingly remaining within specified distance (e.g. 100 feet, 2 blocks) of your home, workplace or school; or the minor's day care or school. If there is someplace else you want to include, add it to the box called "other."
7. The seventh provision asks the court to **grant** you possession of essential personal belongings. Please list the personal belongings. ("Essential personal belongings" means those items necessary for a person's immediate health, welfare, and livelihood. "Essential personal belongings" includes but is not limited to clothing, cribs, bedding, documents, medications, and personal hygiene items.)
8. The eighth provision asks the court to **grant** you use of a vehicle (i.e. blue 1994 Ford Taurus, License Number XYZ123)
9. The ninth provision, "**Other**," is where you may list something not mentioned in the above provisions.

**If there are minors involved and you are requesting restraint provisions check the boxes in 10, 11, and 12.**

10. The tenth provision asks the court to **grant** (give) you the temporary care, custody and control of the children you name.
11. The eleventh provision asks the court to **restrain** the respondent from interfering with your custody of the children you name.
12. The twelfth provision asks the court to **restrain** the respondent from removing the listed children from the state.

Provisions 13, 14, 15, 16, 17 and 18 are only available as part of the Full Order:

13. The thirteenth provision asks the court to **direct** the respondent to get treatment or counseling.
14. The fourteenth provision asks the court to **require** the respondent to pay the fees and costs of this action. (Fees and costs may include court costs, service fees, and reasonable attorney's fees.)
15. The fifteenth provision asks the court to make the order **remain effective** (last longer) than one year. Check this box only if there is reason to believe the respondent would resume the acts of domestic violence against you if the order expired in one year.

16. The sixteenth provision asks the court to **grant** you exclusive custody and control of pet(s). You can only ask for custody and control of a pet if it is owned, possessed, leased, kept, or held by you, the respondent, or a minor child residing with either you or the respondent.
17. The seventeenth provision asks the court to **prohibit** the respondent from interfering with your efforts to remove the pet(s).
18. The eighteenth provision asks the court to **prohibit** the respondent from knowingly coming within or knowingly remaining within specified distance (e.g. 100 feet, 2 blocks) from the location(s) you list where the pet(s) may regularly be found. Remember, you have a right to keep your residential address confidential.
19. The nineteenth provision asks the court to **require** the respondent to surrender any firearm, other dangerous weapon, or concealed pistol license, and prohibit the respondent from obtaining or possessing any of those items.

Please review the section you just completed to ensure that you checked the boxes to show which provisions you want in the protection order. In each provision, be sure you checked the boxes to identify the people and places you want protected.

### **Emergency Temporary Protection**

You might want immediate emergency temporary protection effective immediately, lasting up to 14 days, until the court hearing.

1. The first item asks the court to immediately issue a Temporary Order for Protection without prior notice to the respondent.
2. The second item asks for temporary surrender of a firearm or other dangerous weapon without notice to the respondent because permanent injury could result if an order is not issued until the hearing.

### **Request for Special Assistance from Law Enforcement Agencies**

You might need special help from the police. Check off everything that you think you may need the police to assist you in obtaining.

1. The first item asks the court to order the police to help you get back into your home. For your safety, ask for police escort back into your home.
2. The second item asks the court to order the police to help you get use of the vehicle.
3. The third item asks the court to order the police to help you get your personal belongings (Civil Standby). Check the box if you want the police to help you get your belongings from the shared residence, the respondent's residence or another location. Because of time limitations, availability of officers and safety, contact law enforcement to schedule a civil standby (when they will meet you and how long they can stay).

4. The fourth item asks the court to order the police to help you get custody of the children you list. There may be additional steps that you have to take for this request to be enforced.
5. The last item lets you ask for other help you might need from the police.

### **Statement of Petitioner**

The statement of petitioner is to describe to the court why a protection order is needed. This document will be filed in the court file, which is public record, and shall be served on the respondent. If you do not include a particular incident of domestic violence in your statement, you may not have an opportunity to tell the court at the hearing.

“Domestic violence” means physical harm, bodily injury, assault, including sexual assault, stalking, *or* inflicting fear of imminent physical harm, bodily injury or assault between family or household members.

First read through the statement section in the petition before you start writing. There are several places for you to describe what happened.

Describe exactly what happened when you were threatened or hurt. Provide as much detail as you can such as dates, times, witnesses, injuries, if any, medical treatment, if any. The more details you can provide the more helpful it is to the judge. If there is an emergency, explain why so the court can issue an immediate temporary order before the hearing. In addition to the information requested in the statement you may want to include:

- If the respondent has hurt other people.
- If the respondent has been arrested.
- If police responded even if no arrests were made.

### **Examples:**

It is better to say “On Sunday, January 13, at 2:00 a.m., Terry slapped my face.” Rather than “On Sunday Terry assaulted me.”

It is better to say “Terry threatened to kill me if I left the house. He said ‘You leave and I will kill you.’” Rather than “Terry threatened me.”

It is better to say “Terry drives by me while I’m waiting at the bus stop after work every Monday evening.” Rather than “Terry is stalking me.”

It is better to say “Terry sends me emails or text messages [include number] times a day. I texted Terry to stop; but Terry keeps sending the messages.” Rather than “Terry cyber stalks me.”

Try to use the respondent’s exact words when you were threatened with physical harm.

If any of the information requested does not apply, write, “Does not apply” in that section.

Choose appropriate box (alcohol, drugs, or other) if substance abuse is involved.

## **Out of State Service**

If the respondent cannot be personally served in Washington State, check the box. Note: The respondent will still have to be personally served, unless the court orders otherwise.

## **Sign the Form**

When you are done with your statement, put today's date in the date line and fill in the city where you are completing this form. Sign the form and also print your name.

The respondent has a right to have you served with documents in response to this petition. You have a right to keep your residential address confidential. If you want to keep your address confidential, you must list an address that is not your residential address where you agree to accept legal documents.

## **Law Enforcement Information Sheet (LEIS)**

You must complete a Law Enforcement Information Sheet (LEIS), form. This form is confidential and it does not go in the public court file and is not served on the respondent.

- It is used by Law Enforcement to locate and identify the respondent when serving documents.
  - It is also used by Law Enforcement when entering the order in the state-wide data base.
- Complete as much information as possible, especially, first name, middle initial, last name, and date of birth.

If the respondent has a disability, brain injury, or other impairment, you may know of special assistance that law enforcement could provide when serving the documents. For example:

“Respondent has a brain injury. If respondent is rushed, respondent may freeze up and may not respond quickly, or may become verbally aggressive. Remind respondent to contact a friend.”

“Respondent has epilepsy and diabetes and may have seizures when stressed. Respondent doesn't respond well to being rushed and will need time to get meds and supplies.”

**In the Tribal Court for the Nooksack Indian Tribe**

<hr/> Petitioner ( <i>Person starting this case</i> )	DOB	<b>Case No.</b>  <b>Petition for Protection Order</b> Clerk's Action:
vs.		
<hr/> Respondent ( <i>Person responding to this case</i> )	DOB	

**Petition for Protection Order**

**What kind protection order do you want?** There are different orders based on the type of harm and how the parties know each other. See definitions in Attachment A. If you have questions about the law concerning Protection Orders, please review Nooksack Tribal Code (NTC) Title 20A.04 (Domestic Violence Protection Orders) and 20A.08 (Anti-Harassment Protection Orders)

- 1. Choose the type of protection order that best fits your situation. Check only one.**
  - Domestic Violence – Protection from an intimate partner or family or household member who has committed domestic violence, nonconsensual sexual conduct or penetration, unlawful harassment, or stalking.
  - Anti-Harassment – Protection from someone who has committed unlawful harassment.
- 2. Jurisdiction.**
  - a. Are the following persons members of the Nooksack Tribe? or other federally recognized Tribe?**

Petitioner: Yes \_\_\_\_\_ No \_\_\_\_\_

Respondent: Yes \_\_\_\_\_ No \_\_\_\_\_

b. Are the following persons members of another federally recognized Tribe?

Petitioner: Yes \_\_\_\_\_ No \_\_\_\_\_. If yes, which Tribe? \_\_\_\_\_

Respondent: Yes \_\_\_\_\_ No \_\_\_\_\_. If yes, which Tribe? \_\_\_\_\_

c. Where did the events which form the basis of the request for a protection order take place?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

d. Are minor children for whom protection is sought members of the Nooksack Tribe, or other federally recognized Tribe?

Name \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Child's Age \_\_\_\_\_

Name \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Child's Age \_\_\_\_\_

Name \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Child's Age \_\_\_\_\_

Statement of authority under Nooksack Tribal Code §20A.03.020 to file this petition for the other person:

[ ] The person, or one of persons, for whom I am filing this petition is under the age of 18 years and I have legal responsibility for him or her.

[ ] The person, or one of the persons for whom I am filing this petition is under the age of 14 years and

[ ] I am the child's parent guardian or other family or household member and not the alleged abuser; or

[ ] I am an adult relative, friend or other representative; or

[ ] I am a representative of Nooksack Youth and Family Services.

e. Long Arm Jurisdiction

\_\_\_\_\_ The Respondent is living or has lived in a marital relationship subject to the Tribe's jurisdiction, notwithstanding departure from Tribal territory, and one party to the marriage continues to reside within tribal territory.

\_\_\_\_\_ The Respondent is the parent, custodian, or other person with a legal interest in an Indian child.

Other facts upon which Long Arm Jurisdiction is based:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- f. Where do Petitioner and/or minor children for whom protection is sought reside? This is the address where the Petitioner would like to receive notices from the Nooksack Tribal Court. *(This address will be kept confidential)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Who are the people involved?** These are the "parties" to the case.

**3. Who should the order restrain? ("Restrained Person")**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Restrained Person's age:  18 or over  unknown

**4. Who should the order protect? ("Protected Person")** *(Check all that apply.)*

**Me.** My name is \_\_\_\_\_

**Minor Children.**

I am the minor's  parent  legal guardian  custodian.

I am age 18 or older and the minor is a member of my family or household.  
*(For domestic violence petitions only.)*

Child's Name	Age	Sex	Lives With	How related to you	How related to Restrained Person

**5. Service address.** What is your address for receiving legal documents? You have the right to keep your residential address private. You may use a different mailing address.

Mail: \_\_\_\_\_

Email *(if you agree to be served by email)*: \_\_\_\_\_

**6. Interpreter**

Do you need an interpreter?  No  Yes, Language: \_\_\_\_\_

**Important!** You may need to request an interpreter separately. You will get instructions with an order setting your hearing.

**How do the parties know each other?**

7. Check all the ways the protected person is connected or related to the restrained person:

**Family or household members** - Protected person and restrained person are family or household members because they are:

- parent and child  stepparent and stepchild
- parent's intimate partner and child  grandparent and grandchild
- current or former cohabitants as roommates
- person who is or has been a legal guardian
- related by blood or marriage (*specify how*) \_\_\_\_\_
- are in or have been in a dating relationship (*see NTC 20A.01.060 (F)*)

**Other** (examples: coworker, neighbor, acquaintance, stranger)

\_\_\_\_\_

**Are there other court cases involving the parties or any children?**

8. **Other court cases.** Have there been any other court cases between any of the people involved in this case or about any children? Include court cases happening now and in the past and requests for protection that were denied or have expired. (*Examples: criminal no contact order, civil protection order, family law restraining order, protection order from another state, tribal order, military orders, parenting plans, divorce, landlord-tenant, employment, property, assault, police investigations. File copies in this court case of everything you want the court to review.*)

No  Yes. If yes, fill out below.

Type of Case (see examples)	Court Location (City or County and State)	Court Type (Superior / District / Municipal / Tribal / Military)	Case Number (if known)	Status (active / dismissed / pending / expired, unknown)

Other details: \_\_\_\_\_

What protections do you need? Check everything you want the court to order.

9. I ask for a protection order with these restraints:

General Restraints

A.  **No Harm:** Do not commit or threaten to commit acts of domestic violence  protected person  the minors named in section 4 above  
 these minors only: \_\_\_\_\_

B.  **No Contact:** Do not have any contact, harass, annoy, telephone or otherwise communicate with:  
 the protected person  the minors named in section 4 above  
 these minors only: \_\_\_\_\_  
 **Exception** (if any): Only this type of contact is allowed: \_\_\_\_\_

C.  **Exclude and Stay Away:** Do not enter, return to, knowingly come within, or knowingly remain within \_\_\_\_\_ feet or other distance (*specify*) \_\_\_\_\_ of  
 the protected person  protected person's vehicle  
 protected person's school  protected person's workplace  
 protected person's residence  protected person's adult day program  
 the shared residence  
 the residence, daycare, or school of  the minors named in section 4 above  
 these minors only: \_\_\_\_\_  
 other: \_\_\_\_\_

**Address:** The protected person chooses to (*check one*)  
 keep their address confidential  list their address here: \_\_\_\_\_

D.  **Vacate shared residence:** The protected person has exclusive right to the residence that the protected person and restrained person share. The restrained person must immediately vacate the residence. The restrained person may take the restrained person's clothing, personal items needed during the duration of the order, and these items (*specify*): \_\_\_\_\_  
from the residence while a law enforcement officer is present.

E.  **Stalking Behavior:** Do not harass, follow, monitor, keep under physical or electronic surveillance, or use phone, video, audio or other electronic means to record, photograph, or track locations or communication, including digital, wire, or electronic communication of  
 the protected person  the minors named in section 4 above  
 these minors only: \_\_\_\_\_  
 these members of the protected person's household: \_\_\_\_\_

F.  **Electronic Monitoring:** The restrained person must submit to electronic monitoring. (*Restrained person must be age 18 or older.*)

G.  **Evaluation:** The restrained person shall get an evaluation for:  
 mental health  chemical dependency (drugs)

H.  **Treatment:** The restrained person shall participate in state-certified treatment for:  
 sex offender  domestic violence perpetrator

I.  **Personal Belongings:** The protected person shall have possession of essential personal belongings, including the following:

\_\_\_\_\_

\_\_\_\_\_

J.  **Vehicle:** The protected person shall have use of the following vehicle:

Year, Make & Model \_\_\_\_\_ License No. \_\_\_\_\_

K.  **Pay Fees and Costs:** The restrained person must pay fees and costs of this action. This may include administrative court costs, service fees, and the protected person's costs including lawyer fees.

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**OTHER RELIEF NTC 20A.03.070 (C)(8)**

**Firearms and Other Dangerous Weapons**

L.  **Surrender Weapons:** The restrained person must immediately surrender to law enforcement and not access, possess, have in their custody or control, purchase, receive, or attempt to purchase or receive firearms, other dangerous weapons, or concealed pistol licenses.

**Important!** *The court may be required to order the restrained person to surrender firearms, other dangerous weapons, or concealed pistol licenses even if you do not request it.*

Does the restrained person have or own firearms?

Yes  No  Unknown

Would the restrained person's use of firearms or other dangerous weapons be a serious and immediate threat to anyone's health or safety?

Yes  No  Unknown

Even if the restrained person does not have firearms now, has the restrained person ever used firearms, other weapons or objects to threaten or harm you?

Yes  No

If Yes, describe what happened.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is the restrained person already not allowed to have firearms?

Yes  No  Unknown

If Yes, why?

\_\_\_\_\_

**Other Relief**

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**Minors NTC §20A.03.070 (C)(6) and NTC 20A.03.070 (C)(8)**

**M. [ ] Custody:** The protected person is granted temporary care, custody and control of  
[ ] the minors named in section 4 above  
[ ] these minors only: \_\_\_\_\_

**N. [ ] Interference:** Do not interfere with the protected person's physical or legal custody of  
[ ] the minors named in section 4 above  
[ ] these minors only: \_\_\_\_\_

**O. [ ] Removal from Whatcom County:** Do not remove from Whatcom County:  
[ ] the minors named in section 4 above  
[ ] these minors only: \_\_\_\_\_

**P. [ ] School Attendance:** Do not attend the elementary, middle, or high school (*school name*) \_\_\_\_\_, that a protected person attends. (*Only if both the restrained person and a protected person are students at the same school. Can apply to students 18 or older. Includes public and private schools.*)

Describe any continuing physical danger, emotional distress, or educational disruption to a protected person that would happen if the restrained person attends the same school.

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**Other**

**Z.** \_\_\_\_\_

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**Do you need help from law enforcement? They may help you get the things you asked for.**

10. **Law Enforcement Help:** Do you want the court to order the appropriate law enforcement agency to help you with any of the things listed below?  
*Check all that apply.*
- Possession of my residence.
  - Possession of the vehicle I asked for in section L above.
  - Possession of my essential personal belongings that are located at
    - the shared residence
    - the restrained person's residence
    - other location: \_\_\_\_\_
  - Custody of  the minors named in section 4 above
    - these minors only \_\_\_\_\_
  - Other: \_\_\_\_\_

**How long do you need this order to last?**

11. **Length of Order**  
*(The order will last for at least one year unless you ask for something different. Orders restraining a parent from contacting their own children may not exceed one year.)*
- I need this order to last for:  1 year  more than 1 year  less than 1 year (*specify how long*): \_\_\_\_\_
- If you checked more or less than one year, briefly explain why.
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**Do you need immediate protection? If needed, you can ask for a Temporary Protection Order that starts now, before the restrained person gets notice. This protection can last up to 15 days or until the court hearing (whichever comes first).**

12. **Immediate Protection:** Do you need a Temporary Protection Order to start immediately, without prior notice to the restrained person?  Yes  No
13. **Immediate Weapons Surrender:** Do you want a temporary order that requires the restrained person give up all firearms, other dangerous weapons, and concealed pistol licenses right away, and prohibits the restrained person from getting more?  
 Yes  No

**If Yes to 14 or 15, explain why:** What serious immediate harm or irreparable injury could occur if an order is not issued immediately without prior notice to the restrained person?  
*(Briefly explain how you or anyone else might be harmed if you do not get protection now.)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**Why do you need a protection order? What happened?** This is your statement, where you tell your experience.

Be as specific and descriptive as possible. Put the date, names, what happened and where. Use names rather than pronouns (he/she/they) as much as possible. If you cannot remember the date, put the time of year it happened (around a holiday, winter, summer, how old your child was) or about how long ago.

For all of the questions below, include details:

- Who did what?
- When did this happen?
- How were any statements made? (in person, mail, text, phone, email, social media)
- How did this make you, the minor, or the vulnerable adult feel?

If you need more space to answer any of the questions below, use form PO 010 Statement or attach additional pages.

- 14. Most Recent Incident.** What happened most recently that made you want a protection order? This could include violent acts, fear or threats of violence, coercive control, nonconsensual sexual conduct or penetration, sexual abuse, harassment, stalking, hate crimes.



**18. Restrained Person's Substance Abuse**

Is substance abuse involved?                     Yes             No             Unknown  
If yes, what type of substance abuse?         Alcohol         Drugs         Other

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**19. Minors Needing Protection, if any** *(If the information is not already included above.)*

Has there been any violence or threats towards children? How have the children been affected by the restrained person's behavior? Were the children present during any of the incidents described above? Describe and give details.

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**20. Supporting Evidence** *(If you have anything else you want the court to see that helps prove what you are saying is true.)*

I am attaching the following evidence to this Petition *(check all that apply)*:

- Pictures
- Text / email / social media messages
- Voice messages (written transcript)
- Written notes / letters / mail
- Police report
- Declaration or statement from witness (name/s): \_\_\_\_\_

Other (describe): \_\_\_\_\_

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**Privacy Warning!** The restrained person will see this Petition and any other evidence you file with the court. This information is also available to the public for anyone to see.  
Before you file any attachments, you can black out (redact) any sensitive information.  
Examples: your home address and account numbers (leave last four digits).

I certify under penalty of perjury under the laws of the Nooksack Indian Tribe and the laws of the State of Washington that all the information provided in this petition and any attachments is true and correct.

I have attached *(number)*: \_\_\_\_\_ pages.

Signed at (City and State): \_\_\_\_\_ Date: \_\_\_\_\_

Sign here

Print name

### **ATTACHMENT A - DEFINITIONS**

#### **Family or Household Member – NTC 20A.01.060 (K)**

"Family or household member" means spouses, domestic partners, former spouses, former domestic partners, persons who have a child in common regardless of whether they have been married or have lived together at any time, adult persons related by blood or marriage, adult persons who are presently residing together or who have resided together in the past, persons sixteen years of age or older who are presently residing together or who have resided together in the past and who have or have had a dating relationship, persons sixteen (16) years of age or older with whom a person sixteen (16) years of age or older has or has had a dating relationship, and persons who have a biological or legal parent-child relationship, including stepparents and stepchildren and grandparents and grandchildren.

#### **Domestic Violence – NTC 20A.01.060 (G)**

"Domestic violence" is: (a) physical harm, bodily injury, assault, or the infliction of fear of imminent physical harm, bodily injury or assault, between family or household members; (b) sexual assault of one family or household member by another; or (c) stalking as defined in Nooksack Criminal Code 20.02.190 of one family or household member by another family or household member.

#### **Unlawful Harassment and Course of Conduct – NTC 20A.08.030**

"Course of Conduct" means a pattern of conduct composed of a series of acts over a period of time, however short, evidencing a continuity of purpose. "Course of conduct" includes, in addition to any other form of communication, contact or conduct, the sending of an electronic communication; it does not include constitutionally protected free speech. Constitutionally protected activity is not included within the meaning of "course of conduct".

"Unlawful Harassment" means a knowing and willful course of conduct directed at a specific person which seriously alarms, annoys, harasses or is detrimental to such person, and which serves no legitimate or lawful purpose. The course of conduct shall be such as would cause a reasonable person to suffer substantial emotional distress, and shall actually cause substantial emotion distress to the petitioner, or, when the course of conduct would cause a reasonable parent or guardian to fear for the well-being of their child.



b. Are the following persons members of another federally recognized Tribe?

Petitioner: Yes \_\_\_\_\_ No \_\_\_\_\_. If yes, which Tribe? \_\_\_\_\_

Respondent: Yes \_\_\_\_\_ No \_\_\_\_\_. If yes, which Tribe? \_\_\_\_\_

c. Where did the events which form the basis of the request for a protection order take place?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

d. Are minor children for whom protection is sought members of the Nooksack Tribe, or other federally recognized Tribe?

Name \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Child's Age \_\_\_\_\_

Name \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Child's Age \_\_\_\_\_

Name \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Child's Age \_\_\_\_\_

Statement of authority under Nooksack Tribal Code §20A.03.020 to file this petition for the other person:

[ ] The person, or one of persons, for whom I am filing this petition is under the age of 18 years and I have legal responsibility for him or her.

[ ] The person, or one of the persons for whom I am filing this petition is under the age of 14 years and

[ ] I am the child's parent guardian or other family or household member and not the alleged abuser; or

[ ] I am an adult relative, friend or other representative; or

[ ] I am a representative of Nooksack Youth and Family Services.

e. Long Arm Jurisdiction

\_\_\_\_\_ The Respondent is living or has lived in a marital relationship subject to the Tribe's jurisdiction, notwithstanding departure from Tribal territory, and one party to the marriage continues to reside within tribal territory.

\_\_\_\_\_ The Respondent is the parent, custodian, or other person with a legal interest in an Indian child.

Other facts upon which Long Arm Jurisdiction is based:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- f. Where do Petitioner and/or minor children for whom protection is sought reside? This is the address where the Petitioner would like to receive notices from the Nooksack Tribal Court. *(This address will be kept confidential)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Who are the people involved?** These are the "parties" to the case.

**3. Who should the order restrain? ("Restrained Person")**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Restrained Person's age:  18 or over  unknown

**4. Who should the order protect? ("Protected Person")** *(Check all that apply.)*

**Me.** My name is \_\_\_\_\_

**Minor Children.**

I am the minor's  parent  legal guardian  custodian.

I am age 18 or older and the minor is a member of my family or household.  
*(For domestic violence petitions only.)*

Child's Name	Age	Sex	Lives With	How related to you	How related to Restrained Person

**5. Service address.** What is your address for receiving legal documents? You have the right to keep your residential address private. You may use a different mailing address.

Mail: \_\_\_\_\_

Email *(if you agree to be served by email)*: \_\_\_\_\_

**6. Interpreter**

Do you need an interpreter?  No  Yes, Language: \_\_\_\_\_

**Important!** You may need to request an interpreter separately. You will get instructions with an order setting your hearing.

**How do the parties know each other?**

7. Check all the ways the protected person is connected or related to the restrained person:

**Family or household members** - Protected person and restrained person are family or household members because they are:

- parent and child  stepparent and stepchild
- parent's intimate partner and child  grandparent and grandchild
- current or former cohabitants as roommates
- person who is or has been a legal guardian
- related by blood or marriage (*specify how*) \_\_\_\_\_
- are in or have been in a dating relationship (*see NTC 20A.01.060 (F)*)

**Other** (examples: coworker, neighbor, acquaintance, stranger)

\_\_\_\_\_

**Are there other court cases involving the parties or any children?**

8. **Other court cases.** Have there been any other court cases between any of the people involved in this case or about any children? Include court cases happening now and in the past and requests for protection that were denied or have expired. (*Examples: criminal no contact order, civil protection order, family law restraining order, protection order from another state, tribal order, military orders, parenting plans, divorce, landlord-tenant, employment, property, assault, police investigations. File copies in this court case of everything you want the court to review.*)

No  Yes. If yes, fill out below.

Type of Case (see examples)	Court Location (City or County and State)	Court Type (Superior / District / Municipal / Tribal / Military)	Case Number (if known)	Status (active / dismissed / pending / expired, unknown)

Other details: \_\_\_\_\_

**What protections do you need?** Check everything you want the court to order.

**9. I ask for a protection order with these restraints:**

**General Restraints**

A.  **No Harm:** Do not commit or threaten to commit acts of domestic violence  protected person  the minors named in section 4 above  
 these minors only: \_\_\_\_\_

B.  **No Contact:** Do not have any contact, harass, annoy, telephone or otherwise communicate with:  
 the protected person  the minors named in section 4 above  
 these minors only: \_\_\_\_\_  
 **Exception** (if any): Only this type of contact is allowed: \_\_\_\_\_

C.  **Exclude and Stay Away:** Do not enter, return to, knowingly come within, or knowingly remain within \_\_\_\_\_ feet or other distance (*specify*) \_\_\_\_\_ of  
 the protected person  protected person's vehicle  
 protected person's school  protected person's workplace  
 protected person's residence  protected person's adult day program  
 the shared residence  
 the residence, daycare, or school of  the minors named in section 4 above  
 these minors only: \_\_\_\_\_  
 other: \_\_\_\_\_

**Address:** The protected person chooses to (*check one*)  
 keep their address confidential  list their address here:  
\_\_\_\_\_

D.  **Vacate shared residence:** The protected person has exclusive right to the residence that the protected person and restrained person share. The restrained person must immediately vacate the residence. The restrained person may take the restrained person's clothing, personal items needed during the duration of the order, and these items (*specify*): \_\_\_\_\_  
from the residence while a law enforcement officer is present.

E.  **Stalking Behavior:** Do not harass, follow, monitor, keep under physical or electronic surveillance, or use phone, video, audio or other electronic means to record, photograph, or track locations or communication, including digital, wire, or electronic communication of  
 the protected person  the minors named in section 4 above  
 these minors only: \_\_\_\_\_  
 these members of the protected person's household : \_\_\_\_\_

F.  **Electronic Monitoring:** The restrained person must submit to electronic monitoring.  
(*Restrained person must be age 18 or older.*)

G.  **Evaluation:** The restrained person shall get an evaluation for:  
 mental health  chemical dependency (drugs)

H.  **Treatment:** The restrained person shall participate in state-certified treatment for:  
 sex offender  domestic violence perpetrator

I.  **Personal Belongings:** The protected person shall have possession of essential personal belongings, including the following:

\_\_\_\_\_

\_\_\_\_\_

J.  **Vehicle:** The protected person shall have use of the following vehicle:

Year, Make & Model \_\_\_\_\_ License No. \_\_\_\_\_

K.  **Pay Fees and Costs:** The restrained person must pay fees and costs of this action. This may include administrative court costs, service fees, and the protected person's costs including lawyer fees.

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**OTHER RELIEF NTC 20A.03.070 (C)(8)**

**Firearms and Other Dangerous Weapons**

L.  **Surrender Weapons:** The restrained person must immediately surrender to law enforcement and not access, possess, have in their custody or control, purchase, receive, or attempt to purchase or receive firearms, other dangerous weapons, or concealed pistol licenses.

**Important!** *The court may be required to order the restrained person to surrender firearms, other dangerous weapons, or concealed pistol licenses even if you do not request it.*

Does the restrained person have or own firearms?

Yes  No  Unknown

Would the restrained person's use of firearms or other dangerous weapons be a serious and immediate threat to anyone's health or safety?

Yes  No  Unknown

Even if the restrained person does not have firearms now, has the restrained person ever used firearms, other weapons or objects to threaten or harm you?

Yes  No

If Yes, describe what happened.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is the restrained person already not allowed to have firearms?

Yes  No  Unknown

If Yes, why?

\_\_\_\_\_

**Other Relief**

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**Minors NTC §20A.03.070 (C)(6) and NTC 20A.03.070 (C)(8)**

**M. [ ] Custody:** The protected person is granted temporary care, custody and control of  
[ ] the minors named in section 4 above  
[ ] these minors only: \_\_\_\_\_

**N. [ ] Interference:** Do not interfere with the protected person's physical or legal custody of  
[ ] the minors named in section 4 above  
[ ] these minors only: \_\_\_\_\_

**O. [ ] Removal from Whatcom County:** Do not remove from Whatcom County:  
[ ] the minors named in section 4 above  
[ ] these minors only: \_\_\_\_\_

**P. [ ] School Attendance:** Do not attend the elementary, middle, or high school (*school name*) \_\_\_\_\_, that a protected person attends.  
(*Only if both the restrained person and a protected person are students at the same school. Can apply to students 18 or older. Includes public and private schools.*)

Describe any continuing physical danger, emotional distress, or educational disruption to a protected person that would happen if the restrained person attends the same school.

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**Other**

**Z.** \_\_\_\_\_

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**Do you need help from law enforcement? They may help you get the things you asked for.**

10. **Law Enforcement Help:** Do you want the court to order the appropriate law enforcement agency to help you with any of the things listed below?  
*Check all that apply.*

- Possession of my residence.
- Possession of the vehicle I asked for in section L above.
- Possession of my essential personal belongings that are located at
  - the shared residence
  - the restrained person's residence
  - other location \_\_\_\_\_
- Custody of  the minors named in section 4 above  
 these minors only \_\_\_\_\_
- Other: \_\_\_\_\_

**How long do you need this order to last?**

11. **Length of Order**

*(The order will last for **at least one year** unless you ask for something different. Orders restraining a parent from contacting their own children may not exceed one year.)*

I need this order to last for:  1 year  more than 1 year  less than 1 year (specify how long): \_\_\_\_\_

If you checked more or less than one year, briefly explain why.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Do you need immediate protection? If needed, you can ask for a Temporary Protection Order that starts now, before the restrained person gets notice. This protection can last up to 15 days or until the court hearing (whichever comes first).**

12. **Immediate Protection:** Do you need a Temporary Protection Order to start immediately, without prior notice to the restrained person?  Yes  No

13. **Immediate Weapons Surrender:** Do you want a temporary order that requires the restrained person give up all firearms, other dangerous weapons, and concealed pistol licenses right away, and prohibits the restrained person from getting more?  
 Yes  No

**If Yes to 14 or 15, explain why:** What serious immediate harm or irreparable injury could occur if an order is not issued immediately without prior notice to the restrained person?  
*(Briefly explain how you or anyone else might be harmed if you do not get protection now.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





**18. Restrained Person's Substance Abuse**

Is substance abuse involved?                     Yes             No             Unknown  
If yes, what type of substance abuse?         Alcohol         Drugs         Other

**19. Minors Needing Protection, if any** *(If the information is not already included above.)*

Has there been any violence or threats towards children? How have the children been affected by the restrained person's behavior? Were the children present during any of the incidents described above? Describe and give details.

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**20. Supporting Evidence** *(If you have anything else you want the court to see that helps prove what you are saying is true.)*

- I am attaching the following evidence to this Petition *(check all that apply)*:
- Pictures
  - Text / email / social media messages
  - Voice messages (written transcript)
  - Written notes / letters / mail
  - Police report
  - Declaration or statement from witness (name/s): \_\_\_\_\_
- Other (describe): \_\_\_\_\_

**Privacy Warning!** The restrained person will see this Petition and any other evidence you file with the court. This information is also available to the public for anyone to see.  
Before you file any attachments, you can black out (redact) any sensitive information.  
Examples: your home address and account numbers (leave last four digits).

I certify under penalty of perjury under the laws of the Nooksack Indian Tribe and the laws of the State of Washington that all the information provided in this petition and any attachments is true and correct.

I have attached *(number)*: \_\_\_\_\_ pages.

Signed at (City and State): \_\_\_\_\_ Date: \_\_\_\_\_

Sign here

Print name

## **ATTACHMENT A - DEFINITIONS**

### **Family or Household Member – NTC 20A.01.060 (K)**

"Family or household member" means spouses, domestic partners, former spouses, former domestic partners, persons who have a child in common regardless of whether they have been married or have lived together at any time, adult persons related by blood or marriage, adult persons who are presently residing together or who have resided together in the past, persons sixteen years of age or older who are presently residing together or who have resided together in the past and who have or have had a dating relationship, persons sixteen (16) years of age or older with whom a person sixteen (16) years of age or older has or has had a dating relationship, and persons who have a biological or legal parent-child relationship, including stepparents and stepchildren and grandparents and grandchildren.

### **Domestic Violence – NTC 20A.01.060 (G)**

"Domestic violence" is: (a) physical harm, bodily injury, assault, or the infliction of fear of imminent physical harm, bodily injury or assault, between family or household members; (b) sexual assault of one family or household member by another; or (c) stalking as defined in Nooksack Criminal Code 20.02.190 of one family or household member by another family or household member.

### **Unlawful Harassment and Course of Conduct – NTC 20A.08.030**

"Course of Conduct" means a pattern of conduct composed of a series of acts over a period of time, however short, evidencing a continuity of purpose. "Course of conduct" includes, in addition to any other form of communication, contact or conduct, the sending of an electronic communication; it does not include constitutionally protected free speech. Constitutionally protected activity is not included within the meaning of "course of conduct".

"Unlawful Harassment" means a knowing and willful course of conduct directed at a specific person which seriously alarms, annoys, harasses or is detrimental to such person, and which serves no legitimate or lawful purpose. The course of conduct shall be such as would cause a reasonable person to suffer substantial emotional distress, and shall actually cause substantial emotion distress to the petitioner, or, when the course of conduct would cause a reasonable parent or guardian to fear for the well-being of their child.

Whatcom

CIVIL

COUNTY SUPERIOR COURT

Case Information Cover Sheet (CICS)

Case Number \_\_\_\_\_ Case Title \_\_\_\_\_

Attorney Name \_\_\_\_\_ Bar Membership Number \_\_\_\_\_

Please check one category that best describes this case for indexing purposes. Accurate case indexing not only saves time in docketing new cases, but helps in forecasting needed judicial resources. Cause of action definitions are listed on the back of this form. Thank you for your cooperation.

Form updated 12/28/2020

- |  |  |
|--|--|
| <input type="checkbox"/> ABJ Abstract of Judgment                            | <input type="checkbox"/> PRG Property Damage -- Gangs                    |
| <input type="checkbox"/> ABL Abusive Litigation                              | <input type="checkbox"/> PRP Property Damages                            |
| <input type="checkbox"/> ALR Administrative Law Review                       | <input type="checkbox"/> QTI Quiet Title                                 |
| <input type="checkbox"/> ALRJT Administrative Law Review-Jury Trial (L&I)    | <input type="checkbox"/> RDR Relief from Duty to Register                |
| <input type="checkbox"/> BAT Ballot Title                                    | <input type="checkbox"/> RFR Restoration of Firearm Rights               |
| <input type="checkbox"/> CHN Non-Confidential Change of Name                 | <input type="checkbox"/> SDR School District-Required Action Plan        |
| <input type="checkbox"/> CBC Contractor Bond Complaint                       | <input type="checkbox"/> SER Subdivision Election Process Law Review     |
| <input type="checkbox"/> COL Collection                                      | <input type="checkbox"/> SPC Seizure of Property-Commission of Crime     |
| <input type="checkbox"/> CON Condemnation                                    | <input type="checkbox"/> SPR Seizure of Property-Resulting from Crime    |
| <input type="checkbox"/> COM Commercial                                      | <input type="checkbox"/> STK Stalking Petition                           |
| <input type="checkbox"/> CRP Pet. for Cert. of Restoration of Opportunity    | <input type="checkbox"/> SXP Sexual Assault Protection                   |
| <input type="checkbox"/> DOL Appeal Licensing Revocation                     | <input type="checkbox"/> TAX Employment Security Tax Warrant             |
| <input type="checkbox"/> DVP Domestic Violence                               | <input type="checkbox"/> TAX L & I Tax Warrant                           |
| <input type="checkbox"/> EOM Emancipation of Minor                           | <input type="checkbox"/> TAX Licensing Tax Warrant                       |
| <input type="checkbox"/> FJU Foreign Judgment                                | <input type="checkbox"/> TAX Revenue Tax Warrant                         |
| <input checked="" type="checkbox"/> FOR Foreclosure                          | <input type="checkbox"/> TMV Tort - Motor Vehicle                        |
| <input checked="" type="checkbox"/> FPO Foreign Protection Order             | <input type="checkbox"/> TRJ Transcript of Judgment                      |
| <input type="checkbox"/> HAR Unlawful Harassment                             | <input type="checkbox"/> TTO Tort - Other                                |
| <input type="checkbox"/> INJ Injunction                                      | <input type="checkbox"/> TXF Tax Foreclosure                             |
| <input type="checkbox"/> INT Interpleader                                    | <input type="checkbox"/> UND Unlawful Detainer -- Commercial             |
| <input type="checkbox"/> LCA Lower Court Appeal - Civil                      | <input type="checkbox"/> UND Unlawful Detainer -- Residential            |
| <input type="checkbox"/> LCI Lower Court Appeal - Infractions                | <input type="checkbox"/> VAP Vulnerable Adult Protection Order           |
| <input type="checkbox"/> LUPA Land Use Petition Act                          | <input type="checkbox"/> VEP Voter Election Process Law Review           |
| <input type="checkbox"/> MAL Other Malpractice                               | <input type="checkbox"/> VVT Victims of Motor Vehicle Theft-Civil Action |
| <input type="checkbox"/> MED Medical Malpractice                             | <input type="checkbox"/> WDE Wrongful Death                              |
| <input type="checkbox"/> MHA Malicious Harassment                            | <input type="checkbox"/> WHC Writ of Habeas Corpus                       |
| <input type="checkbox"/> MSC2 Miscellaneous - Civil                          | <input type="checkbox"/> WMW Miscellaneous Writs                         |
| <input type="checkbox"/> MST2 Minor Settlement - Civil (No Guardianship)     | <input type="checkbox"/> WRM Writ of Mandamus                            |
| <input type="checkbox"/> PCC Petition for Civil Commitment (Sexual Predator) | <input type="checkbox"/> WRR Writ of Restitution                         |
| <input type="checkbox"/> PFA Property Fairness Act                           | <input type="checkbox"/> WRV Writ of Review                              |
| <input type="checkbox"/> PIN Personal Injury                                 | <input type="checkbox"/> XRP Extreme Risk Protection Order               |
| <input type="checkbox"/> PRA Public Records Act                              | <input type="checkbox"/> XRU Extreme Risk Protection Order Under 18      |

**IF YOU CANNOT DETERMINE THE APPROPRIATE CATEGORY, PLEASE DESCRIBE THE CAUSE OF ACTION BELOW**

**Please Note: Public information in court files and pleadings may be posted on a public Web site.**

# Law Enforcement and Confidential Information (LECIF)

**Clerk: Do not file in a public access file. In criminal cases, do not file. Give to law enforcement.**

\_\_\_\_\_ Court of Washington

County: \_\_\_\_\_

Case No.: \_\_\_\_\_

**Law Enforcement: Do not serve or show a completed LECIF to the other party.**

**Instructions** – The **Protected Person** must complete this form. Fill out **all** sections as much as you can. If you do not know, write "unknown."

Type or print clearly! If law enforcement cannot read this form, they cannot serve or enforce your order!

## 1. Restrained Person's Info

<b>Name:</b> First Middle Last			Date of Birth (if unknown give age range)	
Nickname/Alias/AKA ("Also known as")			Relationship to Protected Person	
Sex	Race		Height	Weight
Eye Color	Hair Color		Skin Tone	Build
Phone/s with Area Code (voice):			Need Interpreter? <input type="checkbox"/> No <input type="checkbox"/> Yes Language:	

## 2. Where can the Restrained Person be served? List all known contact information.

Last Known Address.			
<b>Street:</b>			
City:		State:	Zip:
Cell number (text):		Email:	
Social Media Account/s & User Name/s:			
Other:			
Employer	Employer's Address		Employer's Phone
Work Hours	Driver's License or ID number		State
Vehicle Make and Model	Vehicle License Number	Vehicle Color	Vehicle Year

### 3. Disability, hazard, and weapon info about the Restrained Person

Law enforcement needs this info to serve the order safely

**Does the Restrained Person have a disability, brain injury, or impairment requiring special assistance** when law enforcement serves the order?  No  Yes. If yes, describe (add pages, if needed): \_\_\_\_\_

**Hazard Information** Restrained Person's History includes:

Involuntary/Voluntary Commitment  Suicide Attempt or Threats (How recent?) \_\_\_\_\_  
 Threats to "suicide by cop"  Assault  Assault with Weapons  Alcohol/Drug Abuse  
 Other: \_\_\_\_\_

**Concealed Pistol License:**  Yes  No

**Weapons:**  Handguns  Rifles  Knives  Explosives  Unknown  
 Other (include unassembled firearms and specify): \_\_\_\_\_

**Location of Weapons:**  Vehicle  On Person  Residence Describe in detail:  
 \_\_\_\_\_  
 \_\_\_\_\_

#### Current Status

Is the restrained person a current or former cohabitant as an intimate partner?  Yes  No  
 Are you and the restrained person living together now?  Yes  No  
 Does the restrained person know they may be moved out of the home?  Yes  No  N/A  
 Does the restrained person know you are trying to get this order?  Yes  No  
 Is the restrained person likely to react violently when served?  Yes  No

### 4. Protected Person's Info

<b>Name:</b>	First	Middle	Last	Date of Birth
	Sex	Race		Height
	Eye Color	Hair Color		Weight
				Skin Tone
				Build

If your information **is not confidential**, you must enter your address and phone number/s below.

Current Address. Street:	Phone(s) w/Area Code
City: _____ State: _____ Zip: _____	
Email address: _____	Need interpreter? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, language: _____

If your info **is confidential**, you must give a name, address, and phone of someone willing to be your "contact."

Contact Name: _____
Contact Address _____
Contact Phone _____

If you filed for someone else, list your name, phone number, and address:

**5. Minor's Info**

*For relationship, use terms such as child, grandchild, stepchild, nephew, or none.*

<b>1</b>	<b>Name:</b> First                      Middle                      Last			
	Birth Date	Sex	Race	Resides With
	Relationship to Protected Person:		Relationship to Restrained Person:	
	<b>Name:</b> First                      Middle                      Last			
<b>2</b>	<b>Name:</b> First                      Middle                      Last			
	Birth Date	Sex	Race	Resides With
	Relationship to Protected Person:		Relationship to Restrained Person:	
	<b>Name:</b> First                      Middle                      Last			
<b>3</b>	<b>Name:</b> First                      Middle                      Last			
	Birth Date	Sex	Race	Resides With
	Relationship to Protected Person:		Relationship to Restrained Person:	
	<b>Name:</b> First                      Middle                      Last			
<b>4</b>	<b>Name:</b> First                      Middle                      Last			
	Birth Date	Sex	Race	Resides With
	Relationship to Protected Person:		Relationship to Restrained Person:	

**More than 4 minors are protected.** (Attach a page to list more children and their details.)

**6. Protected Household Members or Adult Children**

Name:	birth date:

**Privacy Notice:** Only court staff, law enforcement, and some state agencies may see this form. The other party and their lawyer may not see this form unless a court order allows it. State agencies may disclose the information in this form according to their own rules.

**Changes:** If any information changes, fill out another copy of this form and file it with the court clerk.

I declare under penalty of perjury under the laws of the State of Washington that: 1) the information on this form about me is true and correct; 2) the information about the other party is the legitimate, current, or last known contact information.

I have attached \_\_\_\_\_ pages.

Signed at (City and State): \_\_\_\_\_ Date: \_\_\_\_\_

Sign here

Print name here

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IN THE NOOKSACK TRIBAL COURT  
FOR THE NOOKSACK INDIAN TRIBE  
DEMING, WA

Petitioner,  
vs.  
Respondent

Case No.

SUMMONS

To:

**To the Respondent:** The Plaintiff/Petitioner has started a case against you in Nooksack Tribal Court.

The Complaint or Petition served upon you tells you what the Plaintiff/Petitioner is asking for.

**You must respond in writing for the court to consider your side.**

**Deadline!** Your *Response* must be filed with the Court and served on Petitioner within **20 days** of the date you were served this *Summons*. If the case has been filed in court, you must also file your *Response* by the same deadline.

**If you do not** file and serve your *Response* or a *Notice of Appearance* by the deadline:

- No one has to notify you about other hearings in this case, and
- The court may approve the Petitioner's requests without hearing your side. (This is called a *default judgment*.)

**Lawyer not required.** It is a good idea to talk to a lawyer, but you may file and serve your *Response* without one.

**Follow these steps:**

1. **Read** the *Petition* and any other documents you receive with this *Summons*. These documents explain what Petitioner is asking for.

