

ATTORNEY OR PARTY WITHOUT ATTORNEY ( <i>Name, state bar number, and address</i> )	TELEPHONE AND FAX NOS.:	<i>FOR COURT USE ONLY</i>
ATTORNEY FOR ( <i>Name</i> ):		
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF MERCED SUPERIOR COURT</b>		
STREET ADDRESS: 2260 N. Street MAILING ADDRESS: 2222 M. Street CITY AND ZIP CODE: Merced, CA 95340		
GUARDIANSHIP OF		
MINOR(S)		
<b>PETITION FOR MODIFICATION OF VISITATION ORDERS – GUARDIANSHIP</b>		CASE NO.

1.  Guardian  Mother  Father  other: \_\_\_\_\_ requests that the court modify the visitation order issued on: \_\_\_\_\_.

2. The following modification is requested:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. The reason for modification is as follows:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I agree and consent to the above modification of visitation orders issued on _____. By signing below I understand that the court may grant the requested modification with or without my presence at the hearing.			
DATE	NAME (Print)	Signature	Relationship

**DECLARATION**

I declare under the penalty of perjury under the laws of the State of California that the foregoing is true and correct.

DATED: \_\_\_\_\_

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