			MSC-PR-0
ATTORNEY OR	PARTY WITHOUT ATTORNEY (<i>Name, state bar number, and ac</i>	Idress) TELEPHONE AND FAX NOS.:	FOR COURT USE ONLY
ATTORNEY FOR (Name):			
SUPERI STREET ADD MAILING ADDR CITY AND ZIP (ESS: 2222 M. Street		
GUARDIANSHI	OF		-
		MINOR(S)	CASE NO.
	PETITION FOR MO OF VISITATION ORDERS		
1.	[] Guardian [] Mother [] Father	[] other:	requests that the court
	modify the visitation order issued o	n:	
2.	The following modification is reque	sted:	
3.	The reason for modification is as follows:		
agree a	nd consent to the above modification of	of visitation orders issued on	By signing below I
understar	nd that the court may grant the reque	sted modification with or without my prese	ence 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: _____

Signature: _____

Name: _____

PETITION FOR MODIFICATION OF VISITATION ORDERS – GUARDIANSHIP