

Consent to Act as Litigation Guardian    FD \_\_\_\_\_

In the matter of the *Intimate Partner  
Violence Intervention Act*

Between \_\_\_\_\_  
**(Name of Applicant)**

AND \_\_\_\_\_  
**(Name of Respondent)**

I, **(full legal name)** \_\_\_\_\_,

<b>Mailing address (city, town, province, postal code) and</b>	
<b>Indicate physical address if different from above)</b>	

consent to act as litigation guardian for \_\_\_\_\_, **(full legal name)**  
the applicant at the address set out in the confidential information sheet in this application, who is under a  
disability as follows:

minor  
 mentally incompetent or incapable of managing his or her own affairs

My relationship to the applicant is \_\_\_\_\_.

I have no interest in this application adverse to that of \_\_\_\_\_ **(the applicant)**.

I acknowledge that I may be personally liable for any costs awarded against me or the applicant if I act as  
litigation guardian for the applicant.

Litigation Guardian \_\_\_\_\_  
**Signature**

Dated at New Brunswick, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.