

**COURT OF COMMON PLEAS  
JUVENILE DIVISION  
CUYAHOGA COUNTY, OHIO**

In the Matter of:

\_\_\_\_\_  
(Child's name)

Case Number: \_\_\_\_\_

Judge: \_\_\_\_\_

**WAIVER OF SERVICE OF SUMMONS**

I \_\_\_\_\_, acknowledge that I am the/a respondent in the above-captioned  
(Your name)  
matter and that:

1. I have received a copy/copies of the following:

Application to Determine

Custody

Parenting Time

Shared Parenting Plan

Companionship Time

Other \_\_\_\_\_

Motion to Modify

Custody

Parenting Time

Shared Parenting Plan

Companionship Time

Other \_\_\_\_\_

2. I am over 18 (eighteen) years of age and I am not under a disability.

3. I waive service of summons of said document(s) by the Clerk of Court in this proceeding as authorized by Juvenile Rule 16(A) and Civil Rule 4 (D).

\_\_\_\_\_  
Signature of Movant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Movant

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

(\_\_\_\_\_) \_\_\_\_\_  
(Area Code)