

\_\_\_\_\_  
PLAINTIFF

vs.

NO. \_\_\_\_\_

\_\_\_\_\_  
DEFENDANT

**ENTRY OF APPEARANCE AS A SELF-REPRESENTED PARTY**

1. I am the  Plaintiff  Defendant in the above-captioned ( **select one** )  custody,  divorce,  support,  protection from abuse,  paternity case.

2.  This is a new case and I am representing myself in this case and have decided not to hire an attorney to represent me.

OR (check only one box)

This is **NOT** a new case and \_\_\_\_\_ previously represented me in this case.  
(Name of Attorney)

However, I have decided not to be represented by that attorney and hereby direct the Office of Judicial Support to remove that attorney as counsel of record in this case.

I have provided a copy of this form to that attorney listed above at the following address:

\_\_\_\_\_

3. My address for the purpose of receiving all future pleadings and other legal notices is:

\_\_\_\_\_;

**AND** I understand that this address will be the only location to which important documents are sent, and that I am fully responsible to regularly check my mail at such address to ensure that I don't miss important dates or proceedings.

This is my home address.

This is not my home address.

4. My home telephone number is: \_\_\_\_\_ My email address is: \_\_\_\_\_

My cellular telephone number is: \_\_\_\_\_ My facsimile number is: \_\_\_\_\_

5.  **I UNDERSTAND THAT I MUST FILE A NEW FORM EVERY TIME MY ADDRESS, HOME TELEPHONE NUMBER OR CELLULAR TELEPHONE NUMBER CHANGES – NO EXCEPTIONS!**

6.  I have provided a copy of this form to all other attorneys or other self-represented parties at the following addresses as listed below:

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

7.  I fully understand that by deciding to represent myself, the Court will hold me to the same standards of knowledge regarding the Statutory Law, Evidence Law, Local and State Rules of Procedure and applicable case law as a Pennsylvania licensed attorney, and that I must be fully prepared to meet those responsibilities.

**I verify that the statements made in this Entry of Appearance as a Self-Represented Party are true and correct. I understand that if I make false statements herein, that I am subject to the criminal penalties of 18Pa.C.S. § 4904 relating to unsworn falsification to authorities which could result in a fine and/or prison term.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Your Signature)