



## PUEBLO OF LAGUNA COURT

P.O. Box 194 Laguna, New Mexico 87026

Tel. (505) 552-1900

Email: [clerks@pol-nsn.gov](mailto:clerks@pol-nsn.gov)

### PETITION TO ESTABLISH VISITATION (COVER SHEET)

IT IS IMPORTANT THAT PETITION IS FILLED OUT ACCURATELY OR TO THE BEST OF YOUR KNOWLEDGE. UNAVAILABLE INFORMATION WILL ONLY DELAY THE COURT PROCESS.

#### PETITIONER(S):

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Social No: \_\_\_\_\_  
Tribal Affiliation: \_\_\_\_\_ Enrollment No: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Physical Address: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Phone No: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Social No: \_\_\_\_\_  
Tribal Affiliation: \_\_\_\_\_ Enrollment No: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Physical Address: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Phone No: \_\_\_\_\_

#### RESPONDENT(S):

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Social No: \_\_\_\_\_  
Tribal Affiliation: \_\_\_\_\_ Enrollment No: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Physical Address: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Phone No: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Social No: \_\_\_\_\_  
Tribal Affiliation: \_\_\_\_\_ Enrollment No: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Physical Address: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Phone No: \_\_\_\_\_

#### PLEASE DOUBLE CHECK YOUR DOCUMENTS:

- Attach any supporting documents
- Filing Fee of \$6.00 in a Money Order or Cashier's Check
- If you should have any questions or need assistance with the Petition, please refer to our Approved Attorney list for help. Thank you.

IN THE TRIBAL COURT  
PUEBLO OF LAGUNA  
STATE OF NEW MEXICO

CASE NO: \_\_\_\_\_

## PETITION TO ESTABLISH VISITATION

IN THE MATTER OF:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Minor(s)

\_\_\_\_\_  
Petitioner(s)

Vs.

\_\_\_\_\_  
Respondent(s)

COMES NOW, \_\_\_\_\_, the Petitioner(s) and  
state the following:

1. That the Laguna Pueblo Court has jurisdiction over the subject matter herein.
2. That I/we, \_\_\_\_\_ (Petitioner(s))

am/are the:

- Mother
- Father
- Grandparent(s)
- Fictive Kin (not blood related)

of my:  child/ren, or  
 grandchild/ren.

3. List the names, and date of birth of the above-named child/ren, or grandchild/ren:

**Name of Child:**

**Date of Birth:**


4. That I/we Petitioner(s), currently reside at \_\_\_\_\_ (city/village).

I/we are enrolled members of the \_\_\_\_\_ (Pueblo/Tribe)

I/we are NOT enrolled members of the \_\_\_\_\_ (Pueblo/Tribe)

5. That Respondent(s) currently reside at \_\_\_\_\_ (city/village).

Respondent(s) are enrolled members of the \_\_\_\_\_ (Pueblo/Tribe)

Respondent(s) are NOT enrolled members of the \_\_\_\_\_ (Pueblo/Tribe)

6. Currently my/our:

Child/ren       Grandchild/ren       Mother

Father       Grandparent(s)

reside at \_\_\_\_\_ (city/village), and are enrolled members of the \_\_\_\_\_ (Pueblo/Tribe).

7. Why do you feel you need the Court to intervene with visitation rights? Please explain below:

---

---

---

---

8. Is there a current court case open that will prohibit you from seeing the minor child/ren?

- No
- Yes, please explain below:

<b>Court Case #:</b>	<b>Charges or Pending Investigation:</b>	<b>Outcome:</b>

I/We state that the information contained in this Petition is true and accurate to the best of my/our knowledge and belief.

Respectfully Submitted,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature