ADMISSION OF SERVICE

STATE OF SOUTH DAKOTA: SS:
COUNTY OF _____

IN CIRCUIT COURT

_____ JUDICIAL CIRCUIT

IN THE MATTER OF THE GUARDIANSHIP OF _____ Minor Child.	File No: _____ **ADMISSION OF SERVICE**

I, (ENTER NAME) , as the natural (MOTHER / FATHER) of the above-named minor child, hereby admit personal service of the ***Petition for Appointment of Guardians***, the ***Statement of Financial Resources***, and the ***Statement of Rights to Seek Modification or Termination of Guardianship*** in the above-entitled matter by receipt of copies thereof at (ENTER TEXT), (ENTER TEXT) County, South Dakota.

Dated this (DAY) day of (MONTH), (YEAR).

_____
(NAME)
(STREET ADDRESS)
(CITY), SD (ZIP CODE)
(PHONE NUMBER)

State of South Dakota:
ss:
County of (COUNTY NAME):

On this the (DAY) day of (MONTH), (YEAR), before me, the undersigned officer, personally appeared, (ENTER TEXT), known to me or satisfactorily proven to be the person whose name is subscribed to the foregoing instrument and acknowledged that she executed the same for the purposes therein contained.

(NAME)
(STREET ADDRESS)
(CITY), SD (ZIP CODE)
(PHONE NUMBER)

In witness whereof, I hereunto set my hand and official seal.

Notary Public, State of South Dakota

(SEAL)

My Commission Expires:

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