Form 29B

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|  | | SUMMONS  (CHILD PROTECTION RESTRAINING ORDER)  **Magistrates Court of South Australia**  [www.courts.sa.gov.au](http://www.courts.sa.gov.au)  *Criminal Procedure Act 1921*  Section 99AAC | | | | | | | | |  |
| Registry |  | | | | | | | File No |  | | |
| Address |  | | | | | |  | | |  | |
|  | *Street* | | | | | | *Telephone* | | | *Facsimile* | |
|  |  | |  | |  | | |  | | | |
|  | *City/Town/Suburb* | | *State* | | *Postcode* | | | *Email Address* | | | |
| **Defendant** | | | | | | | | | | | |
| Name |  | | |  | | | | | | DOB | |
|  | *Surname* | | | *Given name/s* | | | | | | *dd/mm/yyyy* | |
| Address |  | | | | |  | | | | | |
|  | *Street* | | | | | *Telephone* | | | | | |
|  |  | |  | |  | | |  | | | |
|  | *City/Town/Suburb* | | *State* | | *Postcode* | | | *Email Address* | | | |
| **Applicant** | | | | | | | | | | | |
| Name |  | | |  | | | | | |  | |
|  | *Surname* | | | *Given name/s* | | | | | | *Applicant’s reference / relationship to child* | |
| Rank |  | | | | ID No | | |  | | | |
| Address |  | | | | | | | | | | |
|  | *Street* | | | | | | | | | | |
|  |  | |  | |  | | |  | | | |
|  | *City/Town/Suburb* | | *State* | | *Postcode* | | | *Email Address* | | | |
| **Child for whose benefit order is sought** | | | | | | | | | | | |
| Name |  | | |  | | | | | | DOB | |
|  | *Surname* | | | *Given name/s* | | | | | | *dd/mm/yyyy* | |
| **The applicant says that:**  the defendant is an adult who is, or has been, residing with the above-named child who is under the age of 17 years of whom the defendant is not a guardian;  AND  the defendant and the above-named child are, or have been, residing at premises other than premises in which a guardian of the child resides;  AND  the defendant or another person who resides at, or frequents, premises at which the defendant and the above-named child reside or have resided –  has, within the preceding 10 years, been convicted of the prescribed offence(s) of      ; or  is, or has at any time been, subject to a restraining order under section 99AAC;  OR  as a consequence of the above-mentioned child’s contact or residence with the defendant, the child is at risk of –  sexual, physical, psychological, or emotional abuse or neglect; or  engaging in, or being exposed to, conduct that is an offence under Part 5 of the *Controlled Substances Act 1984*;  AND  that the making of the order is appropriate in the circumstances. | | | | | | | | | | | |

**(Details of the hearing are on the next page)**

|  |  |  |  |  |
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| **An application has been laid seeking an order restraining the defendant from:** | | | | |
| **Hearing details** | Registry | | | Date |
| Address | | | Time       am/pm |
| Telephone | Facsimile | Email Address | |
| Date MAGISTRATES COURT | | | | |
| **IMPORTANT NOTICE TO DEFENDANT**   * Ifyou do not appear a Restraining Order may be made in your absence. * A copy of the application and any evidence that has been tendered to the Court may be obtained from the Registry. | | | | |

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| **Proof of Service** |
| Name of person serving: |
| Address of person serving: |
| Name of person served: |
| Address at which service effected: |
| Date service effected: |
| Time of day: Between       am/pm and       am/pm |
| Method of service (tick box)  personally;  by leaving a copy at the last (or most usual) place of abode with a person apparently residing there and not less than 16 years of age;  by leaving a copy at the place of business with a person apparently employed there and not less than 16 years of age;  any other method permitted by the Rules – specify:  I certify that I served the attached document in the manner described. |
| Certified this       day of       20 |