**ORIGINATING APPLICATION EX PARTE – REGISTRATION FOREIGN ORDER**

MAGISTRATES / YOUTH **Circle one** COURT OF SOUTH AUSTRALIA

SPECIAL STATUTORY JURISDICTION

**……………………………………………………………………………………………………………Full name**

**Applicant**

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| Applicant |  | | | | |
| **Full Name** | | | | |
| Name of responsible officer **If applicable** | **Full Name** | | |  | |
| Responsible officer details **If applicable** | **Rank/position** | | | **Number/identifier** | |
| Name of law firm/solicitor  **If any** |  | | |  | |
| **Law Firm** | | | **Responsible Solicitor** | |
| Address for service |  | | | | |
| **Street Address (including unit or level number and name of property if required)** | | | | |
|  |  |  | |  |
| **City/town/suburb** | **State** | **Postcode** | | **Country** |
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| **Email address** | | | | |
| Phone Details |  | | |  | |
| **Type (eg. home; work; mobile) – Number** | | | **Another number (optional)** | |

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| **Application Details**  **Mark appropriate sections below with an ‘x’**  Matter type:  This Application is to register a Foreign Intervention / Restraining / other **select one** Order.  This Application is made under: ………………………………………………………………………………………………  ………………………………………………………………………………………………**Enter Act and section or other particular provision**  [ ] **Must select** **if Intervention Order selected above** section 30 of the *Intervention Orders (Prevention of Abuse) Act* 2009.  [ ] **Must select** **if Restraining Order selected above** section 99H of the *Criminal Procedure Act* 1921.  [ ] …………………………………………………………………………………………………..**other**  The Applicant seeks the following orders:   1. The Registration of the Foreign I*ntervention / Restraining / other* **Circle one** Order described below, made under:   [ ] section [*5/16C*]**Circle one** of the *Child Protection (Offenders Prohibition Orders) Act* 2004(NSW).  [ ] section 72 of the *Child Protection (Offender Reporting and Registration) Act* 2004(NT).  [ ] section 66I of the *Sex Offenders Registration Act* 2004(Vic).  [ ] section 13C of the *Child Protection (Offender Reporting and Offender Prohibition Order) Act*  2004 (Qld)*.*  [ ] section 9 of the *Community Protection (Offender Reporting) Act* 2005(Tas).  [ ] section [*15/18C*] **Circle one** of the *Crimes (Child Sex Offenders) Act* 2005(ACT).  [ ] section [*19/90*]**Circle one** *Community Protection (Offender Reporting) Act* 2004 (WA).  [ ] section 89 of the *Children’s and Young People’s Well-being Act* 1989 (NZ).  [ ] …………………………………………………………………………………….**Enter other**  [ ] 2. ……………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………**other orders including any necessary adaptations or modifications to the order requested**  This Application is made on the grounds  [ ] set out in the accompanying Affidavit sworn by ………………………………………………..**name**on  ………………………………. **date**  [ ] that  **grounds in separately numbered paragraphs**  ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………  **Only complete if applicable otherwise leave blank**  The Application is urgent because  **Enter grounds in separately numbered paragraphs where more than one**   1. ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………….. |

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| **Details of foreign order**   |  |  | | --- | --- | | State of Issue | ……………………… | | **State** | | Order reference number | ……………………… | | **number** | | Court of issue | ……………………………………………… | | **name of Court** | | Date Foreign Order made | ……………………… | | **date** | | Date Foreign Order expires  **If applicable** | ……………………… | | **date** | | Date Foreign Order served on the Subject | ……………………… | | **date** |   **Subject to Foreign Restraining Order**   |  |  |  |  |  | | --- | --- | --- | --- | --- | | Subject | ……………………………………………… | | | | | **name** | | | | | Address | ……………………………………………………………………… | | | | | **Street: include unit or level number and/or name of property where necessary** | | | | | ……………….. | ………….. | ………… | ………………………….. | | **city/town/suburb** | **state** | **postcode** | **Country** | | Email address **if known** | ……………………………………………… | | | | | **email address** | | | | | Telephone number **if known** | ……………………………………………… | | ……………………………………………… | | | **phone number** | | **alternative phone number** | | | Date of birth **if known**: | ……………………… | | | | | **date of birth** | | | |   **Must complete if Intervention Order selected above, or Order for the protection/benefit of a particular person**  [***Protected person/Person for whose benefit order was made***] **provision for multiple**   |  |  | | --- | --- | | Full name | ……………………………………………… | | **name** | | Date of birth | ……………………… | | **date of birth** | | Relationship to the Respondent at the time the Foreign Order was made | [ ] Partner/spouse  [ ] Child  [ ] Step-child  [ ] Parent  [ ] Step-parent  [ ] Sibling  [ ] Relative  [ ] Neighbour  [ ] Other |   **Reasons for requesting registration of the Foreign Order in South Australia**  ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………… |

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| **Accompanying Documents**  **Mark appropriate sections below with an ‘x’**  Accompanying this Application is a:  [ ] Draft order **mandatory**  [ ] Supporting Affidavit **mandatory**  [ ] If other additional document(s) please list below:  ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………… |