



# SMALL CLAIMS COURT OF YUKON CONSENT TO ACT AS LITIGATION GUARDIAN

Form No. 5

File No. \_\_\_\_\_

Plaintiff(s): (Name)

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_

Defendant(s): (Name)

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_

I, \_\_\_\_\_, of \_\_\_\_\_  
(address and telephone number)

\_\_\_\_\_ Yukon,

### CONSENT TO ACT AS LITIGATION GUARDIAN FOR:

- the plaintiff \_\_\_\_\_
- the defendant \_\_\_\_\_
- the third party \_\_\_\_\_

who is under a legal disability as follows:

- minor (under 19 years of age)
- incapable of managing his or her affairs

My relationship to \_\_\_\_\_ is \_\_\_\_\_  
(name of party)

I have no interest in this action adverse to that of the person under legal disability.

If I am acting as litigation guardian for the plaintiff, I acknowledge that I know I may be personally liable, under paragraph 6(2)(d) of the *Small Claims Court Regulations*, to pay any costs awarded against me or against the person under a legal disability for whom I act.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Litigation Guardian