GR 27 COURTHOUSE FACILITATOR RELEASE OF LIABILITY & DISCLAIMER (RL)

IF YOU ACT AS YOUR OWN ATTORNEY, YOU WILL BE HELD TO THE STANDARDS OF AN ATTORNEY.

If you represent yourself, **you are responsible** for:

- reading the papers **thoroughly** and filling in all sections of documents **completely**.
- submitting all required information.
- service and/or notice as required by law.

The Courthouse Facilitator assists persons who are not represented by an attorney. The Courthouse Facilitator is **NOT** an attorney and will **NOT** establish an attorney-client relationship with you. No portion of this document or any of your communications with the Courthouse Facilitator is considered privileged or confidential. All rulings are made by a Judge/Commissioner and not the Courthouse Facilitator.

The Courthouse Facilitator can answer basic questions about forms and procedures. The Courthouse Facilitator can also answer the same questions for any unrepresented person.

- The Courthouse Facilitator **CANNOT** assist you if you are formally represented by an attorney.
- The Courthouse Facilitator **CANNOT** give legal advice or represent you in Court.
- The Courthouse Facilitator **CANNOT** help you with legal strategy.
- The Courthouse Facilitator **CANNOT** speculate on how the case might turn out or guarantee any results for you in your case.
- The Courthouse Facilitator **CANNOT** take sides.
- The Courthouse Facilitator **CANNOT** be held responsible for the accuracy of the information you provide to the Court.
- The Courthouse Facilitator **CANNOT** be held responsible for the outcome of your case.
- The Courthouse Facilitator **MAY DECLINE** to meet with you if they determine they can no longer assist you.
- The Courthouse Facilitator **WILL ASK** you to leave the office immediately if you behave inappropriately and **MAY REFUSE** future services.

√ **I hereby state that I have read and understand this information.**

√ **I agree that I will not claim that either the Court Facilitator or the Court should be liable for any consequences of incorrect or incomplete information given to me.**

_____	_____
Signature	Date
_____	_____
Print Your Name Here	**Phone Number**
_____	_____
Email Address	**Case No.**

Reason for Appointment:

_____

Paid for Appointment **yes** **no** **Receipt #**