

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

Case Caption:

Consent to Act

Case No. _____

An Order Appointing Guardian ad Litem or Attorney was filed on [Date] _____.

I consent to my appointment as guardian ad litem attorney for _____.

▶ _____

Signature

Name Printed or Typed

Address

Email Address

Telephone Number

Date

State Bar No. (if any)