

**Superior Court of Washington, County of \_\_\_\_\_**

In re:

Petitioner/s *(person/s who started this case)*:

\_\_\_\_\_

And Respondent/s *(other party/parties)*:

\_\_\_\_\_

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

Parenting Plan  
(PPP / PPT / PP)

Clerk's action required: **1**.

## Parenting Plan

**1.** This parenting plan is a *(check one)*:

- Proposal** (request) by a parent *(name/s)*: \_\_\_\_\_  
It is not a signed court order. (PPP)
- Court order** signed by a judge or commissioner. This is a *(check one)*:
- Temporary order. (PPT)
- Final order. (PP)
- This final parenting plan changes the last final parenting plan.

**2. Children** – This parenting plan is for the following children:

Child's name	Age	Child's name	Age
1.		4.	
2.		5.	
3.		6.	

**3. Reasons for putting limitations on a parent** (under RCW 26.09.191)

- a. Abandonment, neglect, child abuse, domestic violence, assault, or sex offense.**  
*(If a parent has any of these problems, the court **must** limit that parent's contact with the children, the right to make decisions for the children, and may not require dispute resolution other than court.)*

Neither parent has any of these problems. *(Skip to **3.b.**)*

- A parent has one or more of these problems as follows (*check all that apply*):
- Abandonment** – (*Parent’s name*): \_\_\_\_\_ intentionally abandoned a child listed in **2** for an extended time.
  - Neglect** – (*Parent’s name*): \_\_\_\_\_ substantially refused to perform his/her parenting duties for a child listed in **2**.
  - Child Abuse** – (*Parent’s name*): \_\_\_\_\_ (or someone living in that parent’s home) abused or threatened to abuse a child. The abuse was (*check all that apply*):  physical  sexual  repeated emotional abuse.
  - Domestic Violence** – (*Parent’s name*): \_\_\_\_\_ (or someone living in that parent’s home) has a history of domestic violence as defined in RCW 26.50.010(1).
  - Assault** – (*Parent’s name*): \_\_\_\_\_ (or someone living in that parent’s home) has assaulted or sexually assaulted someone causing grievous physical harm, causing fear of such harm or resulting in a pregnancy.
  - Sex Offense** –
    - (*Parent’s name*): \_\_\_\_\_ has been convicted of a sex offense as an adult.
    - Someone living in (*parent’s name*): \_\_\_\_\_’s home has been convicted as an adult or adjudicated as a juvenile of a sex offense.

**b. Other problems** that may harm the children’s best interests. (*If a parent has any of these problems, the court **may** limit that parent’s contact with the children and right to make decisions for the children.*)

- Neither parent has any of these problems. (*Skip to 4.*)
- A parent has one or more of these problems as follows (*check all that apply*):
  - Neglect** – (*Parent’s name*): \_\_\_\_\_ neglected his/her parental duties towards a child listed in **2**.
  - Emotional or physical problem** – (*Parent’s name*): \_\_\_\_\_ has a long-term emotional or physical problem that gets in the way of his/her ability to parent.
  - Substance Abuse** – (*Parent’s name*): \_\_\_\_\_ has a long-term problem with drugs, alcohol, or other substances that gets in the way of his/her ability to parent.
  - Lack of emotional ties** – (*Parent’s name*): \_\_\_\_\_ has few or no emotional ties with a child listed in **2**.
  - Abusive use of conflict** – (*Parent’s name*): \_\_\_\_\_ uses conflict in a way that endangers or damages the psychological development of a child listed in **2**.
  - Withholding the child** – (*Parent’s name*): \_\_\_\_\_ has kept the other parent away from a child listed in **2** for a long time, without a good reason.
  - Other** (*specify*): \_\_\_\_\_

**4. Limitations on a parent**

- Does not apply. There are no reasons for limitations checked in **3.a. or 3.b.** above.  
(Skip to **5.**)
- No limitations despite reasons** (explain why there are no limitations on a parent even though there are reasons for limitations checked in **3.a. or 3.b.** above): \_\_\_\_\_  
\_\_\_\_\_

- The following limits or conditions apply to** (parent's name): \_\_\_\_\_  
(check all that apply):

- No contact with the children.
- Limited contact as shown in the Parenting Time Schedule (sections **8 – 11**) below.
- Limited contact as follows (specify schedule, list all contact here **instead** of in a Parenting Time Schedule, skip sections **8 – 11**): \_\_\_\_\_  
\_\_\_\_\_

- Supervised contact.** All parenting time shall be supervised. Any costs of supervision must be paid by (name): \_\_\_\_\_

The supervisor shall be:

- a professional supervisor (name): \_\_\_\_\_
- a non-professional supervisor (name): \_\_\_\_\_

The dates and times of supervised contact will be:

- as shown in the Parenting Time Schedule (sections **8 – 11**) below.
- as follows (specify): \_\_\_\_\_  
\_\_\_\_\_

(Specific rules for supervision, if any): \_\_\_\_\_  
\_\_\_\_\_

- Other limitations or conditions during parenting time (specify): \_\_\_\_\_  
\_\_\_\_\_

- Evaluation or treatment required.** (Name): \_\_\_\_\_ must:

- be evaluated for: \_\_\_\_\_.
- start (or continue) and comply with treatment:
  - as recommended by the evaluation.
  - as follows (specify kind of treatment and any other details): \_\_\_\_\_  
\_\_\_\_\_

- provide a copy of the evaluation and compliance reports (specify details): \_\_\_\_\_  
\_\_\_\_\_

If this parent does not follow the evaluation or treatment requirements above, then  
*(what happens)*: \_\_\_\_\_

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**5. Decision-making**

When the children are with you, you are responsible for them. You can make day-to-day decisions for the children when they are with you, including decisions about safety and emergency health care. Major decisions must be made as follows.

**a. Who can make major decisions about the children?**

Type of Major Decision	Joint <i>(parents make these decisions together)</i>	Limited <i>(only the parent named below has authority to make these decisions)</i>
School / Educational	<input type="checkbox"/>	<input type="checkbox"/> (Name):
Health care (not emergency)	<input type="checkbox"/>	<input type="checkbox"/> (Name):
Other:	<input type="checkbox"/>	<input type="checkbox"/> (Name):
Other:	<input type="checkbox"/>	<input type="checkbox"/> (Name):
Other:	<input type="checkbox"/>	<input type="checkbox"/> (Name):

**b. Reasons for limits on major decision-making, if any:**

- There are no reasons to limit major decision-making.
- Major decision-making **must** be limited because one of the parents has problems as described in **3.a.** above.
- Major decision-making **should** be limited because *(check all that apply)*:
  - Both parents are against shared decision-making.
  - One of the parents does not want to share decision-making and this is reasonable because of:
    - problems as described in **3.b.** above.
    - the history of each parent’s participation in decision-making.
    - the parents’ ability and desire to cooperate with each other in decision-making.
    - the distance between the parents’ homes makes it hard to make timely decisions together.

**6. Dispute Resolution – If you and the other parent disagree:**

From time to time, the parents may have disagreements about shared decisions or about what parts of this parenting plan mean. To solve disagreements about this parenting plan, the parents will go to a dispute resolution provider or court. The court may only require a dispute resolution provider if there are no limitations in **3a.**

**a. The parents will go to (check one):**

- The dispute resolution provider below (before they may go to court):
  - Mediation *(mediator or agency name)*: \_\_\_\_\_

*If there are domestic violence issues, you may only use mediation if the victim asks for mediation, mediation is a good fit for the situation, and the victim can bring a support person to mediation.*

Arbitration (*arbitrator or agency name*): \_\_\_\_\_

Counseling (*counselor or agency name*): \_\_\_\_\_

If a dispute resolution provider is not named above, or if the named provider is no longer available, the parents may agree on a provider or ask the court to name one.

**Important!** Unless there is an emergency, the parents must participate in the dispute resolution process listed above in good faith, before going to court. This section does **not** apply to disagreements about money or support.

Court (without having to go to mediation, arbitration, or counseling).

*(If you check this box, skip to section 7 below, do not fill out 6,b.)*

b. If mediation, arbitration, or counseling is required, one parent must notify the other parent by (*check one*):  certified mail  other (*specify*): \_\_\_\_\_

The parents will pay for the mediation, arbitration, or counseling services as follows (*check one*):

(*Name*): \_\_\_\_\_ will pay \_\_\_\_\_%,

(*Name*): \_\_\_\_\_ will pay \_\_\_\_\_%.

based on each parents' Proportional Share of Income (percentage) from line 6 of the *Child Support Worksheet*.

as decided through the dispute resolution process.

**What to expect in the dispute resolution process:**

- Preference shall be given to carrying out the parenting plan.
- If you reach an agreement, it must be put into writing, signed, and both parents must get a copy.
- If the court finds that you have used or frustrated the dispute resolution process without a good reason, the court can order you to pay financial sanctions (penalties) including the other parent's legal fees.
- You may go back to court if the dispute resolution process doesn't solve the disagreement or if you disagree with the arbitrator's decision.

**7. Custodian**

The custodian is (*name*): \_\_\_\_\_ solely for the purpose of all state and federal statutes which require a designation or determination of custody. Even though one parent is called the custodian, this does not change the parenting rights and responsibilities described in this plan.

*(Washington law generally refers to parenting time and decision-making, rather than custody. However, some state and federal laws require that one person be named the custodian. The custodian is the person with whom the children are scheduled to reside a majority of their time.)*

➤ **Parenting Time Schedule (Residential Provisions)**

Check one:

- Skip** the parenting time schedule in sections **8 - 11** if one parent has no contact with the children other than what is described in section **4** – Limitations.

The children live with (name): \_\_\_\_\_ except as described in section **4**.

- Complete** the parenting time schedule in sections **8 - 11**.

**8. School Schedule**

**a. Children under School-Age**

- Does not apply. All children are school-age.
- The schedule for children under school-age is the same as for school-age children.
- Children under school-age are scheduled to live with (name): \_\_\_\_\_, except when they are scheduled to live with (name): \_\_\_\_\_ on (check all that apply):
  - WEEKENDS:  every week  every other week  other (specify): \_\_\_\_\_  
from (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m. to (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m.  
from (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m. to (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m.
  - WEEKDAYS:  every week  every other week  other (specify): \_\_\_\_\_  
from (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m. to (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m.  
from (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m. to (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m.
  - OTHER (specify): \_\_\_\_\_
- Other (specify): \_\_\_\_\_

**b. School-Age Children**

- This schedule will apply when (check one):  the youngest child  the oldest child
- each child begins:  
(check one):  Kindergarten  1st grade  Other: \_\_\_\_\_
- The children are scheduled to live with (name): \_\_\_\_\_, except when they are scheduled to live with (name): \_\_\_\_\_ on (check all that apply):
- WEEKENDS:  every week  every other week  other (specify): \_\_\_\_\_  
from (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m. to (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m.  
from (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m. to (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m.
  - WEEKDAYS:  every week  every other week  other (specify): \_\_\_\_\_  
from (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m. to (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m.

from (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m. to (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m.

OTHER (specify): \_\_\_\_\_

Other (specify): \_\_\_\_\_

## 9. Summer Schedule

Summer begins and ends  according to the school calendar.  as follows: \_\_\_\_\_

The Summer Schedule is the **same** as the School Schedule. (Skip to **10.**)

The Summer Schedule is the **same** as the School Schedule **except** that each parent shall spend \_\_\_\_\_ weeks of uninterrupted vacation time with the children each summer. The parents shall confirm their vacation schedules in writing by the end of (date) \_\_\_\_\_ each year. (Skip to **10.**)

The Summer Schedule is **different** than the School Schedule. The Summer Schedule will begin the summer before:

(check one):  the youngest child  the oldest child  each child

begins (check one):  Kindergarten  1st grade  Other: \_\_\_\_\_

During the summer the children are scheduled to live with (name): \_\_\_\_\_, except when they are scheduled to live with (name): \_\_\_\_\_ on (check all that apply):

WEEKENDS:  every week  every other week  other (specify): \_\_\_\_\_

from (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m. to (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m.

from (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m. to (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m.

WEEKDAYS:  every week  every other week  other (specify): \_\_\_\_\_

from (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m. to (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m.

from (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m. to (day) \_\_\_\_\_ at \_\_\_\_:\_\_\_\_.m.

OTHER (specify): \_\_\_\_\_

## 10. Holiday Schedule (includes school breaks)

The Holiday Schedule is the **same** as the School and Summer Schedules above for all holidays and school breaks. (Skip to **11.**)

This is the Holiday Schedule for  all children  school-age children only:  
(Put one parent's name in each column and fill out when the children will be with that parent for holidays and school breaks.)

<b>Holiday</b>	<b>Children with (name):</b>	<b>Children with (name):</b>
Martin Luther King Jr. Day	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
	<input type="checkbox"/> With the parent who has the children for the attached weekend <input type="checkbox"/> Other plan:	
Presidents' Day	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
	<input type="checkbox"/> With the parent who has the children for the attached weekend <input type="checkbox"/> Other plan:	
Mid-winter Break	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
	<input type="checkbox"/> Each parent has the children for the half of break attached to his/her weekend. The children must be exchanged on Wednesday at (time): _____. <input type="checkbox"/> Other plan:	
Spring Break	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
	<input type="checkbox"/> Each parent has the children for the half of break attached to his/her weekend. The children must be exchanged on Wednesday at (time): _____. <input type="checkbox"/> Other plan:	
Mother's Day	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
	<input type="checkbox"/> Other plan:	
Memorial Day	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
	<input type="checkbox"/> With the parent who has the children for the attached weekend <input type="checkbox"/> Other plan:	



<b>Holiday</b>	<b>Children with (name):</b>	<b>Children with (name):</b>
Father's Day	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
	<input type="checkbox"/> Other plan:	
Fourth of July	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
	<input type="checkbox"/> Follow the Summer Schedule in section <b>9</b> .	
	<input type="checkbox"/> Other plan:	
Labor Day	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
	<input type="checkbox"/> With the parent who has the children for the attached weekend	
	<input type="checkbox"/> Other plan:	
Thanksgiving Day / Break	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
	<input type="checkbox"/> Other plan:	
Winter Break	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
	<input type="checkbox"/> Other plan:	
Christmas Eve	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
	<input type="checkbox"/> Follow the Winter Break schedule above.	
	<input type="checkbox"/> Other plan:	

Holiday	Children with (name):	Children with (name):
Christmas Day	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
<input type="checkbox"/> Follow the Winter Break schedule above. <input type="checkbox"/> Other plan: _____		
New Year's Eve / New Year's Day <i>(odd/even is based on New Year's Day)</i>	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
<input type="checkbox"/> Follow the Winter Break schedule above. <input type="checkbox"/> Other plan: _____		
Children's Birthdays	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
<input type="checkbox"/> Other plan: _____		
All three-day weekends not listed elsewhere	<i>(Federal holidays, school in-service days, etc.)</i> <input type="checkbox"/> The children shall spend any unspecified holiday or non-school day with the parent who has them for the attached weekend. <input type="checkbox"/> Other plan: _____	
Other occasion important to the family: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
<input type="checkbox"/> Other plan: _____		
Other occasion important to the family: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____	<input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____
<input type="checkbox"/> Other plan: _____		

## 11. Conflicts in Scheduling

The Holiday Schedule must be observed over all other schedules. If there are conflicts within the Holiday Schedule (*check all that apply*):

- Named holidays shall be followed before school breaks.
  - Children's birthdays shall be followed before named holidays and school breaks.
  - Other (*specify*): \_\_\_\_\_
- 

## 12. Transportation Arrangements

The children will be exchanged for parenting time (picked up and dropped off) at:

- each parent's home
- school or day care when in session
- other location (*specify*): \_\_\_\_\_

Who is responsible for arranging transportation?

- The **picking up** parent – The parent who is about to **start** parenting time with the children must arrange to have the children picked up.
- The **dropping off** parent – The parent whose parenting time is **ending** must arrange to have the children dropped off.

Other details (if any): \_\_\_\_\_

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## 13. Moving with the Children (Relocation)

If the person with whom the children are scheduled to reside a majority of their time plans to move (relocating person), s/he **must notify** every person who has court-ordered time with the children.

### ***Move to a different school district***

If the move is to a different school district, the relocating person must complete the form *Notice of Intent to Move with Children* (FL Relocate 701) and deliver it at least **60 days** before the intended move.

*Exceptions:*

- If the relocating person could not reasonably have known enough information to complete the form in time to give 60 days' notice, s/he must give notice within **5 days** after learning the information.
- If the relocating person is relocating to a domestic violence shelter or moving to avoid a clear, immediate and unreasonable risk to health or safety, notice may be delayed **21 days**.
- If information is protected under a court order or the address confidentiality program, it may be withheld from the notice.
- A relocating person who believes that giving notice would put her/himself or a child at unreasonable risk of harm, may ask the court for permission to leave things out of

the notice or to be allowed to move without giving notice. Use form *Motion to Limit Notice of Intent to Move with Children (Ex Parte)* (FL Relocate 702).

The *Notice of Intent to Move with Children* can be delivered by having someone personally serve the other party or by any form of mail that requires a return receipt.

If the relocating person wants to change the *Parenting Plan* because of the move, s/he must deliver a proposed *Parenting Plan* together with the *Notice*.

### ***Move within the same school district***

If the move is within the *same* school district, the relocating person still has to let the other parent know. However, the notice does not have to be served personally or by mail with a return receipt. Notice to the other party can be made in any reasonable way. No specific form is required.

### ***Warning! If you do not notify...***

A relocating person who does not give the required notice may be found in contempt of court. If that happens the court can impose sanctions. Sanctions can include requiring the relocating person to bring the children back if the move has already happened, and ordering the relocating person to pay the other side's costs and lawyer's fees.

### ***Right to object***

A person who has court-ordered time with the children can object to a move to a different school district and/or to the relocating person's proposed *Parenting Plan*. If the move is within the same school district, the other party doesn't have the right to object to the move, but s/he may ask to change the *Parenting Plan* if there are adequate reasons under the modification law (RCW 26.09.260).

An objection is made by filing the *Objection about Moving with Children and Petition about Changing a Parenting/Custody Order (Relocation)* (form FL Relocate 721). File your *Objection* with the court and serve a copy on the relocating person and anyone else who has court-ordered time with the children. Service of the *Objection* must be by personal service or by mailing a copy to each person by any form of mail that requires a return receipt. The *Objection* must be filed and served no later than **30 days** after the *Notice of Intent to Move with Children* was received.

### ***Right to move***

During the 30 days after the *Notice* was served, the relocating person may not move to a different school district with the children unless s/he has a court order allowing the move.

After the 30 days, if no *Objection* is filed, the relocating person may move with the children without getting a court order allowing the move.

After the 30 days, if an *Objection* has been filed, the relocating person may move with the children **pending** the final hearing on the *Objection* **unless**:

- The other party gets a court order saying the children cannot move, or
- The other party has scheduled a hearing to take place no more than 15 days after the date the *Objection* was served on the relocating person. (However, the relocating person may ask the court for an order allowing the move even though a hearing is pending if the relocating person believes that s/he or a child is at unreasonable risk of harm.)

The court may make a different decision about the move at a final hearing on the *Objection*.



- attached as Exhibit A as part of this *Parenting Plan*.
- other: \_\_\_\_\_

**Conclusions of Law** – This *Parenting Plan* is in the best interest of the children.

- Other: \_\_\_\_\_

**Order** – The parties must follow this *Parenting Plan*.

\_\_\_\_\_ ▶ \_\_\_\_\_  
*Date* *Judge or Commissioner signs here*

**Warning!** If you don't follow this *Parenting Plan*, the court may find you in contempt (RCW 26.09.160). You still have to follow this *Parenting Plan* even if the other parent doesn't. Violation of **residential** provisions of this order with actual knowledge of its terms is punishable by contempt of court and may be a criminal offense under RCW 9A.40.060(2) or 9A.40.070(2). Violation of this order may subject a violator to arrest.

**If this is a court order, the parties and/or their lawyers (and any GAL) sign below.**

This order (*check any that apply*):

- is an agreement of the parties.
- is presented by me.
- may be signed by the court without notice to me.

This order (*check any that apply*):

- is an agreement of the parties.
- is presented by me.
- may be signed by the court without notice to me.

▶ \_\_\_\_\_ ▶ \_\_\_\_\_  
*Petitioner signs here or lawyer signs here + WSBA #* *Respondent signs here or lawyer signs here + WSBA #*

\_\_\_\_\_  
*Print Name* *Date* *Print Name* *Date*

This order (*check any that apply*):

- is an agreement of the parties.
- is presented by me.
- may be signed by the court without notice to me.

This order (*check any that apply*):

- is an agreement of the parties.
- is presented by me.
- may be signed by the court without notice to me.

▶ \_\_\_\_\_ ▶ \_\_\_\_\_  
*Other party signs here or lawyer signs here + WSBA #* *Other party or Guardian ad Litem signs here*

\_\_\_\_\_  
*Print Name* *Date* *Print Name* *Date*