

**IN THE COURT OF COMMON PLEAS OF LEHIGH COUNTY, PENNSYLVANIA
ORPHANS' COURT DIVISION**

In re: _____ :
_____ : File No.
An Alleged Incapacitated Person _____ :

ENTRY OF APPEARANCE

To the Clerk of the Orphans' Court Division:

Enter my appearance for _____
(Client's Name)

who is:

- The alleged incapacitated person
- A fiduciary for the alleged incapacitated person :

Specify nature of fiduciary relationship
- Heir[s] of alleged incapacitated person:

Specify relationship to AIP

Specify relationship to AIP

Specify relationship to AIP
- Interested Party:

Specify nature of relationship to AIP

Specify nature of relationship to AIP

Date: _____

Signature

Printed Name

*Supreme Court I. D. and **full** date of admittance*

Address

Telephone Number

E-mail address

Fax Number