



SUPREME COURT FALKLAND ISLANDS

FIRST APPLICATION FOR THE APPOINTMENT OF A RECEIVER

IN THE MATTER OF

(A PATIENT)

I of apply to the
Supreme Court for:

1. my own appointment as receiver for the patient
 - (a) I am not related to the patient*
 - (b) I am the [state relationship]of the patient*

2. The appointment of of
as receiver for the patient.
 - (a) he / she is not related to the patient*
 - (b) he she is the [state relationship]of the patient*

**delete whichever does not apply*

3. The appointment of some other suitable person *(do not delete)*

(where any other order in addition to that at paragraphs 1,2 & 3 is required a general form of application should be used.)

Applicant's signature:

Date:

OR legal practitioner for the applicant:

Of: