


NOTICE OF APPEARANCE		DOCKET NUMBER	Massachusetts Trial Court 
CASE NAME		COURT DEPARTMENT (Select only one court.)	
		<input type="checkbox"/> Boston Municipal Court <input type="checkbox"/> District Court <input type="checkbox"/> Housing Court <input type="checkbox"/> Juvenile Court <input type="checkbox"/> Land Court <input type="checkbox"/> Probate & Family Court <input type="checkbox"/> Superior Court	
v.		COURT DIVISION OR COUNTY	

Notice of Appearance

Please enter my appearance in this case:

☐ for myself.

☐ as attorney for: _____.

Please print or type all of the information requested below.

NAME (FIRST, MIDDLE, LAST)			B.B.O. OR STATE BAR NUMBER (IF APPLICABLE)	
FIRM OR AGENCY NAME (IF APPLICABLE)			OFFICE OR HOME PHONE NUMBER	
STREET ADDRESS		APT/UNIT #	MOBILE PHONE NUMBER	
CITY/TOWN	STATE	ZIP CODE	E-MAIL ADDRESS	
DATED		SIGNATURE		