

\_\_\_\_\_  
PLAINTIFF

IN THE COURT OF COMMON PLEAS  
DAUPHIN COUNTY, PENNSYLVANIA

vs.

NO. \_\_\_\_\_

\_\_\_\_\_  
DEFENDANT

**ENTRY OF APPEARANCE AS A SELF-REPRESENTED PARTY**

**This form shall be used in all civil cases except for custody, divorce, protection from abuse, paternity and support.**

- 1. I am the  Plaintiff  Defendant in the above-captioned case and have chosen to represent myself.
- 2. My address for the purpose of this case and for serving me with all future pleadings and other legal notices is:  
\_\_\_\_\_. I understand that this address will be the only address to which notices and pleadings in this case will be sent, and that I am responsible to regularly check my mail at this address to ensure that I know of important deadlines or scheduled proceedings.
- 3. My telephone number where I can be reached during normal business hours (8:00 a.m. – 4:30 p.m. Monday – Friday) is \_\_\_\_\_.
- 4. **I UNDERSTAND I MUST FILE A NEW FORM EVERY TIME MY ADDRESS OR TELEPHONE NUMBER CHANGES.**

5. I certify that I have provided a copy of this form to all other attorneys or other self-represented parties at the following addresses as listed below: (Use reverse side if you need more space)

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

6. I fully understand that by deciding to represent myself, the Court will hold me to the same standards of knowledge regarding the statutory law, evidence law, Local and State Rules of Procedure and applicable case law as a Pennsylvania licensed attorney, and that I must be fully prepared to meet those responsibilities.

**I verify that the statements made in this Entry of Appearance as a Self-Represented Party are true and correct. I understand that if I make false statements herein, that I am subject to the criminal penalties of 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities which could result in a fine and/or prison term.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Your Signature)

**CERTIFICATION**

I, \_\_\_\_\_, certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature