
Confidential contact details

Form C8

Family Procedure Rules 2010 Rule 29.1

The Court
{ FORMTEXT }

Case number
{ FORMTEXT }

The full name(s) of the child(ren)
{ FORMTEXT }
{ FORMTEXT }
{ FORMTEXT }
{ FORMTEXT }
Your full name
{ FORMTEXT }

The omitted contact details

Use this form if you do not want to reveal your contact details in family court proceedings. This includes your address, telephone number, email address and any contact details of children you are responsible for. These details will be kept for use by the court and the Children and Family Court Advisory and Support Service (Cafcass) or CAFCASS Cymru. They will not be revealed to anyone else, except by order of the court.

You must make sure that any form or document, either completed by you now, or at a later date, for use in court **does not** contain the information you wish to keep private. This includes documents received from other people, for example medical reports or financial statements.

The court staff are not able to check the documents you submit to the court for any unintentional disclosure of your contact details.

Please list below the contact details that you wish to keep private.

{ FORMTEXT }

Do not attach this document to any other form.

Statement of truth

I understand the proceedings for contempt of court may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief in its truth.

- I believe** that the facts stated in this form or any continuation sheets are true.
- The applicant** believes that the facts stated in this form and any continuation sheets are true. **I am authorised** by the applicant to sign this statement.
- The respondent** believes that the facts stated in this form and any continuation sheets are true. **I am authorised** by the respondent to sign this statement.

Signature

{ FORMTEXT }

- Applicant/Respondent
- Applicant's/Respondent's legal representative (as defined in FPR 2.3(1))

Date

Day	Month	Year
{ {	{ {	{ { { {
F F	F F	F F F F
O O	O O	O O O O
R R	R R	R R R R
M M	M M	M M M M
T T	T T	T T T T
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} }	} }	} } } }

Full Name

{ FORMTEXT }

Name of Applicant's/Respondent's legal representative's firm

{ FORMTEXT }

If signing on behalf of firm or company give position or office held

{ FORMTEXT }

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