



C8

Confidential contact details

Family Procedure Rules 2010 Rule 29.1

Use this form if you do not want to reveal your contact details. For example, this may be because you believe someone involved in the case could harm you or a child.

You can also use this form if you do not want to reveal the contact details of another person in the case.

Contact details include an address, phone number, email address, and the name of anyone a child lives with, if that person is not already part of the case.

These details will be kept for use by the court and by the Children and Family Court Advisory and Support Service (Cafcass), Cafcass Cymru or a local authority, if any of them are involved in your case. They will not be revealed to anyone else unless the court orders that this should happen.

You must make sure that any forms or documents you submit to the court do not include the confidential contact details. This includes documents from other people, such as medical or financial reports.

Court staff cannot check the documents you submit for any unintended sharing of confidential contact details.

1. Name of court

2. Case number

3. The full name(s) of the child(ren)

4. The name of the person whose details are to be kept confidential

5. Is this person currently a resident in a refuge?

Yes

No

Do not know

The omitted contact details

List below the contact details that you wish to keep confidential. Only include contact details which you believe the other people in the case do not already know.

If you want another person's details kept confidential, complete a separate form for each person.

Statement of truth

I understand that 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 and 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

Applicant/Respondent

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

Date

Day	Month	Year

Full name

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

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