

**IN THE JUVENILE COURT OF FULTON COUNTY
STATE OF GEORGIA**

In the interest of _____ : Sex _____
_____ : Age ____ DOB _____
A child. : File# _____ Case#(s) _____
: _____
: _____

WAIVER OF ARRAIGNMENT
O.C.G.A. 15-11-472 and O.C.G.A. 15-11-511

A complaint/petition was filed on the above named child alleging that the child is a delinquent child in need of supervision, treatment or rehabilitation.

Comes now the child and his/her attorney, and waives his/her right to arraignment.

_____ The child denies the allegations in the petition.

_____ The time limits waived.

By signature herein, I acknowledge receipt of a copy hereof.

This _____ day of _____, 20____.

Signature of Child

Signature of Parent/Guardian

Signature of Attorney