

5) The changing needs of the child(ren) as the child(ren) grow and mature will be dealt with in the following manner:

6) Other:

The child(ren)'s exposure to harmful parental conflict will be minimized; the parents will, in appropriate circumstances, meet their responsibilities through agreements; and both parents will protect the best interests of the child(ren).

Signature of party ▶	Date signed	Signature of attorney <i>(if applicable)</i> ▶	Date signed
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Certification

I certify that a copy of this document was or will immediately be mailed or delivered electronically or non-electronically on (date) _____ to all attorneys and self-represented parties of record and that written consent for electronic delivery was received from all attorneys and self-represented parties of record who received or will immediately be receiving electronic delivery.

Name and address of each party and attorney that copy was or will be mailed or delivered to*

*If necessary, attach additional sheet or sheets with name and address which the copy was or will be mailed or delivered to.

Signed <i>(Signature of filer)</i> ▶	Print or type name of person signing	Date signed
Mailing address <i>(Number, street, town, state and zip code)</i>		Telephone number