**ONTARIO SUPERIOR COURT OF JUSTICE**

# Participant Information Form

This form is to be used:

* in place of previous ‘counsel slips’, and
* for all hearings using the CaseLines document sharing platform. For these hearings, parties or their representatives are to complete the form and upload it into the CaseLines event folder/bundle.

Where possible, the moving party for the event should coordinate with other parties to complete one form for the hearing. In criminal matters, each party may prepare their own form.

This form must be saved using the court’s document naming convention (e.g. Participant Information – All Parties – 01-JUN-2021 or Participant Information – Defendant Smith – 01-JUN-2021).

## CASE AND EVENT INFORMATION

|  |  |
| --- | --- |
| **Court File Number** |       |
| **Court Location *(e.g. Hamilton)*** |       |
| **Case Name** |       |
| **Type of Hearing** |       |
| **Date of Hearing** |       |

## PARTICIPANT INFORMATION

### For Plaintiff, Applicant, Moving Party, Crown:

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Person Appearing(and how they wish to be addressed, e.g. pronouns and/or prefix; also, if they wish, the phonetic pronunciation of their name) | Name of Party | Phone Number[[1]](#footnote-2) | Email Address |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

### For Defendant, Respondent, Responding Party, Defence:

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Person Appearing(and how they wish to be addressed, e.g. pronouns and/or prefix; also, if they wish, the phonetic pronunciation of their name) | Name of Party | Phone Number | Email Address |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

### For Other:

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Person Appearing**(and how they wish to be addressed, e.g. pronouns and/or prefix; also, if they wish, the phonetic pronunciation of their name) | **Name of Party / Organization** | **Phone Number** | **Email Address** |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

1. Please provide a phone number where you can be reached during the virtual/hybrid hearing, if necessary. [↑](#footnote-ref-2)