

IN THE MATTER OF:

**Petition for Visitation by a Minor’s Grandparent(s) and/or Stepparent Chapter 54**

\_\_\_\_\_ Child’s Name

\_\_\_\_\_ Date of Birth \_\_\_\_\_ Case No. \_\_\_\_\_

Comes now the Petitioner(s), pursuant to Chapter 54.56 (1-5) and respectfully requests the court to grant me/us visitation privileges. The following state the reasons for my/our request:

- 1. The Petitioner(s) is/are resident(s) of Milwaukee County or \_\_\_\_\_.
- 2. The Petitioner(s) is/are the grandparent(s) or stepparent of \_\_\_\_\_, the minor child for whom visitation is requested.

3. The parent(s) of the child is/are:

Mother: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Father: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

4. One of the following conditions exist (*check all that apply*):

One or both of the child’s parents are deceased and I/we are the parent(s) of the deceased parent; 54.56(2)

Petitioner is the stepparent, the surviving spouse of a deceased parent of a minor (whether or not the surviving spouse has remarried); 54.56(1)

Other: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Wherefore, Petitioner(s) requests that the Court order the following:

1. Reasonable permanent visitation privileges to the Petitioner(s);
2. Reasonable temporary visitation privileges to the Petitioner(s) until the final decision is made;  
and
3. Such other and further relief as the Court deems appropriate

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**THIS DOCUMENT MUST BE SIGNED IN FRONT OF A NOTARY PUBLIC**

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\_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
Petitioner's Name (printed or typed)

\_\_\_\_\_  
Petitioner's Name (printed or typed)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Subscribed and sworn to before me on:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary Public/Court Official signature

\_\_\_\_\_  
Notary Public/Court Official Name (printed or typed)

\_\_\_\_\_  
My Commission expires