

APPLICATION FOR BOND

IN THE JUVENILE COURT OF
_____ COUNTY, GEORGIA

In the Interest of:

_____,
Child. CASE NUMBER _____
SEX _____
DOB _____ AGE _____

Now comes _____,
(Name)
parent/guardian/legal custodian of _____,
(Juvenile)
being held in the _____ charged with the offense(s)
of _____
and respectfully requests that the within named child be released on bond returnable to this
juvenile court in the custody of the undersigned, to be returned to this Court at a date and time to
be specified.

This _____ day of _____ 20____.

(Name)

(Street)

(City, State, Zip Code)

Witness:

Application denied/approved and bond set in the amount of \$_____

This _____ day of _____ 20____.

Judge/Associate Judge of
_____ County Juvenile Court