

COURT DATE REQUEST FORM

CITATION #: _____

STATE OF TEXAS
VS

IN THE MUNICIPAL COURT
CITY OF BAYOU VISTA
GALVESTON COUNTY, TEXAS

(Defendant's Name)

***Contact the court for your Court Date – 409-935-8348**

The above named defendant is formally requesting a court date in the above-referenced citation in the Municipal Court of Bayou Vista, Galveston County, Texas at 2929 Hwy 6, Bayou Vista, Texas 77563.

COURT DATE: * _____, 20____ at **3:00 P.M.**
(Month) (Date) (Year)

I am mailing this request before my Court Contact Date on My Citation. Any failure of delivery by postal service is the sole responsibility of the defendant to verify that the Court did receive this request. I Have Read, Understand and Will Appear on the Above Court Date.

Mail to: City of Bayou Vista Municipal Court
2929 Hwy 6, Suite 100
Bayou Vista, TX 77563

I am faxing this request by my Court Contact Date on My Citation. Any failure in electronic transmission of this fax is the sole responsibility of the defendant to verify that the Court did receive this fax. I Have Read, Understand and Will Appear on the Above Court Date.

Fax to: 409-935-1205

DL# _____ D.O.B. _____ Defendant's Signature _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone #: _____

FAX OR MAIL THIS FORM WITH A COPY OF YOUR CITATION AND DRIVER'S LICENSE/PHOTO IDENTIFICATION CARD BEFORE YOUR COURT CONTACT DATE ON YOUR CITATION.

(Keep a Copy of this form for your records)

Dress Code and Courtroom Rules Strictly Enforced:

- *No T-Shirts
- *No Tank Tops
- *No Halter Tops
- (All Shirts must be tucked in)
- *No Flip Flops
- *No Beach Attire
- *No Shorts
- *No hats are to be worn in Courtroom
- *No Visible piercings (except earrings for women only)
- *No Gum Chewing
- *No Drinks
- *ALL Electronic Devices Must be SILENCED or Turned Off