**The Family Court of the State of Delaware**

In and For  New Castle County  Kent County  Sussex County

**ATTORNEY ELECTION FORM – ELECTRONIC ORDERS**

|  |
| --- |
| Attorney Name |
|  |
| Firm Name |
|  |
| Office Address |
|  |
|  |
| Office Phone |
|  |
| Cell Phone |
|  |
| Bar ID Number |
|  |

|  |  |
| --- | --- |
|  | I authorize Family Court to deliver court orders in my civil case(s) to my email address in an encrypted |
|  | email instead of to my mailing address. I understand that by providing my email address on this form, |
|  | all orders in my pending civil cases in Family Court will be sent to my email address encrypted by |
|  | Egress and will not be mailed to my physical address. |
|  |  |
|  | For more information on how to receive an encrypted email through Egress, please visit |
|  | <https://judicial.state.de.us/courtdox/Download.aspx?id=94888&court=readonly>. |

|  |  |
| --- | --- |
|  | I withdraw my authorization for Family Court to send court orders to my email address rather than my |
|  | physical address. I understand that by withdrawing this authorization I will only receive court orders at |
|  | my physical address and not my email address. |

|  |  |
| --- | --- |
|  | I wish to continue receiving court orders by email at a new email address. |

|  |  |  |
| --- | --- | --- |
| Email Address: |  |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signature |  | Printed Name |

|  |  |
| --- | --- |
|  |  |
| Date |  |