RULE 2.1
SUMMONS

The summons issued pursuant to RCW 71.05.150 shall include the following:

(a) The date and time for appearance, not less than 24 hours from the time at which the summons is served, at an evaluation and treatment facility.

(b) The address of the evaluation and treatment facility.

(c) The business address and business telephone number of the designated mental health professional.

(d) A statement that the person summoned may be detained at the evaluation and treatment facility for up to 72 hours excluding Saturdays, Sundays, and holidays.

(e) A statement whether the 72-hour evaluation period is on outpatient or inpatient status.

(f) A statement that if the person summoned fails to appear at the evaluation and treatment facility on or before the date and time indicated, he may be taken into custody.

(g) A statement that an attorney will be appointed for the person summoned unless the person has retained his own attorney.

(h) The name, business address and business telephone number of the designated attorney.

(i) The summons shall be in substantially the following form:

THE STATE OF WASHINGTON TO (name of person to be detained):

It is alleged that because of mental disorder you present a likelihood of serious harm to yourself, other persons, or the property of other persons, or are gravely disabled.

You are hereby required to appear in person at (address of evaluation and treatment facility) in (city), Washington, on or before (hour) on (month, day, year) for evaluation and possible treatment. You may be detained without court order for evaluation and possible treatment for not more than 72 hours, not including Saturdays, Sundays, or holidays. If you fail to appear in person on or before the date stated above, you may be taken into custody.

You have the right to have an attorney. (Name, address, telephone number) will be appointed as your attorney unless you make arrangements to be represented by another attorney.

Dated this _____ day of _____, 19____.

(Signed) _____
Mental Health Professional
(name) County, Washington
Address: _____
Telephone: _____