

***CITY OF NORTH MYRTLE BEACH  
MUNICIPAL COURT***

**JURY TRIAL REQUEST FORM**

**FOR USE BY ATTORNEYS ONLY**

PLEASE COMPLETE THE FOLLOWING INFORMATION:

Defendant's Name:

Case/Ticket/Warrant Number(s):

\_\_\_\_\_

\_\_\_\_\_

Attorney's Name:

\_\_\_\_\_

Attorney's Mailing Address:

\_\_\_\_\_

\_\_\_\_\_

Attorney's Telephone Number:

\_\_\_\_\_

Attorney's E-Mail Address:

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\_\_\_\_\_  
Attorney's Signature

This form must be sent to: North Myrtle Beach Municipal Court  
Attn: Kerry Smith, Clerk  
1015 Second Avenue South  
North Myrtle Beach, SC 29582

Or FAX to: (843) 280-5642