Your name(s) (adopting parent(s	s)):		
a			
b			
Relationship to child:			
Address (skip this if you have a lawyer):			
City:	State:	Zip:	
Telephone number:			

I am the child listed in  $\,$  and I agree to the adoption. (Not required in the case of a tribal customary adoption under Welf. & Inst. Code, § 366.24.)

I agree to the other parent's adoption of the child.	
If this is a tribal customary adoption, read and sign below. I/we are the adopting parents listed in ①, and I/we agree that the child will:  a. Be adopted and treated as my/our legal child (Fam. Code, § 8612(b)) and  b. Have the same rights and duties stated in the tribal customary adoption order dated	
Date: Type or print your name Signature of adopting parent	
For stepparent adoptions only:  If you are the legal parent of the child listed in , read and sign below.	

Your name:	Case Number:
8 Executed (check one):	
a. This form was signed outside of a hearing. (Select this option only for spouse or partner who gave birth to the child during the union, wher good cause.)  (1) This form was signed in California  This form was signed in front of the following type of witness (or notary public (the notary acknowledgment is attached)  court clerk  probation officer  qualified court investigator  authorized representative of a licensed adoption agency  county welfare department staff member  (2) This form was signed outside of California  This form was signed in front of the following type of witness (or notary public (the notary acknowledgment is attached)  other person authorized to perform notarial acts (proof of not authorized representative of an adoption agency that is licens form was signed  (3) Witness information	the court did not order a hearing for check one):  check one):  tarization is attached)
This form was signed in: (county)(state)	
b. This form was signed at a hearing in front of a judicial officer. (The	judge will date and sign the form below.
Date: Judge (or Judic	cial Officer)

Clear this form