

Agreement to the making of a parental order in respect of my child

Section 54 of the Human Fertilisation and Embryology Act 2008

Name of child.....

Before signing this form you are advised to seek legal advice about agreeing to the making of a parental order and the effect on your parental rights. If you are making this agreement outside the United Kingdom you should seek legal advice about the law in the country concerned. Publicly funded legal advice may be available from the Community Legal Service. You can get information about this or find a solicitor through CLS Direct on www.clsdirect.org.uk or by telephoning 0845 345 4 345

I agree to a parental order being made in respect of _____ (my child), who is the child to whom the attached certified copy of the entry in the Register of Live Births relates. in favour of

*[_____] (the named prospective parents)]

If a parental order is made in respect of my child, I understand that I will no longer legally be treated as the parent and that my child will become a part of the applicants' family.

I understand that I may withdraw my agreement at any time until the court makes the parental order. If I do withdraw my agreement and want my child returned to me, I understand that I must notify the court that I have changed my mind and I must, at all times, act through the court and not approach the applicants directly.

I have not received any payment or reward from any person making arrangements for the parental order for my child.

*[I have taken legal advice] / *[I have not taken legal advice, but I have been advised to do so],
about giving agreement to a parental order being made in respect of my child and the effect on my parental rights.
**(delete as appropriate)*

I agree unconditionally and with full understanding of what is involved, to the making of a parental order in respect of _____ (my child) in favour of

*[_____] (the applicants)]

Signed.....

on.....day of20xx

Witness statement

This form was signed by
on the.....day of20xx
before me (*print full name*).....

Signed.....

Office of witness*.....

Address of witness.....

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* In England and Wales this form must be witnessed by an officer of the Children and Family Court Advisory and Support Service (Cafcass) or, where the child is ordinarily resident in Wales, by a Welsh family proceedings officer.