

FINAL AND IRREVOCABLE SURRENDER FOR PURPOSES OF ADOPTION

I, (relationship, e.g., mother, father, relative, guardian) of a male female child state:

1. That such child was born on, at
2. That I reside at,
in the City/ Village or Town of,
County of,
and State of
3. That I am of the age of years.
4. That I do hereby surrender and entrust the entire custody and control of such child to the
..... (the "Agency"), a (public) (licensed) child welfare
agency with its principal office in the City of,
County of and State of, for the purpose
of enabling it to care for and supervise the care of such child, to place such child for adoption
and to consent to the legal adoption of such child.
5. That I hereby grant to the Agency full power and authority to place such child with any
person or persons it may in its sole discretion select to become the adopting parent or parents
and to consent to the legal adoption of such child by such person or persons; and to take any
and all measures which, in the judgment of the Agency, may be for the best interests of such
child, including authorizing medical, surgical and dental care and treatment including
inoculation and anesthesia for such child.
6. That I wish to and understand that by signing this surrender I do irrevocably and permanently
give up all custody and other parental rights I have to such child.
7. That I understand I cannot under any circumstances, after signing this surrender, change my
mind and revoke or cancel this surrender or obtain or recover custody or any other rights over
such child.
8. That I have read and understand the above and I am signing it as my free and voluntary act.

Dated
Signature