



A101A

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

Name 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

Name of 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.

I agree unconditionally and with full understanding of what is involved, to the making of a parental order in respect of

Name of my child

in favour of

Name of the applicants

Signed

Dated

Day

Month

Year

Witness statement

This form was signed by

Day Month Year

before me (print full name)

Signed

Office of witness*

Address

First line of address

Second line of address

Town or city

County (optional)

Postcode

* 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.