Α	DOPT-210 Adoption Agreement	Clerk stamps date here when form is filed.
(1)	Your name(s) (<i>adopting parent</i> (s)):	
\bigcirc	a	_
	b	_
	Relationship to child:	_
	Address (skip this if you have a lawyer):	
	City: State: Zip:	_
	Telephone number:	 Fill in court name and street address:
	Lawyer (<i>if any</i>): (Name, address, telephone numbers, e-mail address, and State Bar number):	Superior Court of California, County of
2)	Child's name before adoption:	Court fills in case number when form is filed.
	Child's name after adoption:	
	Date of birth:Age:	_

Signing this forms:

- Adoptions usually require a hearing where most signatures on this form must be completed in front of a judge.
- *Item 4(b) may be signed before the hearing.*
- If this is a stepparent adoption to confirm parentage involving a spouse or registered domestic partner who gave birth to the child during the union, usually no hearing is required and you may sign this form in front of a proper witness. See paragraph 8(a) for instructions on having your signature properly witnessed. If the court orders a hearing in this case, you must sign this form at the hearing in front of the judge.
- All other signatures must be signed at a hearing, in front of a judge, unless waived by the judge for good cause.
- **3** I am the child listed in **2** and I agree to the adoption. (*Not required in the case of a tribal customary adoption under Welf. & Inst. Code, § 366.24.*)

Date:

Type or print your name

Signature of child (child must sign if 12 or older; optional if child is under 12)

4) If there is only **one** adopting parent, read and sign below.

- a. I am the adopting parent listed in (1), and I agree that the child will:
 - (1) Be adopted and treated as my legal child (Fam. Code, § 8612(b)) and
 - (2) Have the same rights as a natural child born to me, including the right to inherit my estate.

Date:		}
	 Type or print your name	Signature of adopting parent

b. I am married to, or the registered domestic partner of, the adopting parent listed in (1), and I am not a party to this adoption. I agree to his or her adoption of the child.

Date:		<u>J</u>			
	Type or print your name	Signature of spouse or registered domestic partner (may be signed before hearing)			
<i>If there are two add</i> the child will:	<i>If there are two adopting parents, read and sign below.</i> We are the adopting parents listed in ①, and we agree that the child will:				
-	d treated as our legal child (<i>Fam. Code,</i> e rights as a natural child born to us, incl				
I agree to the other	parent's adoption of the child.	、 、			
Date:		}			
	Type or print your name	Signature of adopting parent			
I agree to the other	parent's adoption of the child.				
Date:		}			
Date	Type or print your name	Signature of adopting parent			
agree that the child a. Be adopted and					
agree that the child a. Be adopted and b. Have the same <i>attached</i>).	l will: d treated as my/our legal child (<i>Fam. Co</i>	ode, § 8612(b)) and tomary adoption order dated(cop			
agree that the child a. Be adopted and b. Have the same <i>attached</i>). If two adopting par	l will: d treated as my/our legal child (<i>Fam. Co</i> rights and duties stated in the tribal cus	ode, § 8612(b)) and tomary adoption order dated(cop			
agree that the child a. Be adopted and b. Have the same <i>attached</i>).	l will: d treated as my/our legal child (<i>Fam. Co</i> rights and duties stated in the tribal cus	ode, § 8612(b)) and tomary adoption order dated(cop			
agree that the child a. Be adopted and b. Have the same <i>attached</i>). If two adopting par Date:	I will: d treated as my/our legal child (<i>Fam. Co</i> e rights and duties stated in the tribal cus rents, we agree to the other parent's ado	ode, § 8612(b)) and stomary adoption order dated(cop ption of the child. }			
agree that the child a. Be adopted and b. Have the same <i>attached</i>). If two adopting par	I will: d treated as my/our legal child (<i>Fam. Co</i> e rights and duties stated in the tribal cus rents, we agree to the other parent's ado	ode, § 8612(b)) and atomary adoption order dated(cop ption of the child.			
 agree that the child a. Be adopted and b. Have the same <i>attached</i>). If two adopting par Date: Date: For stepparent ado If you are the legal I am the legal parent 	I will: d treated as my/our legal child (Fam. Color e rights and duties stated in the tribal cus rents, we agree to the other parent's adoption Type or print your name Type or print your name Options only: I parent of the child listed in (2), read and	ode, § 8612(b)) and atomary adoption order dated(cop) ption of the child.			
 agree that the child a. Be adopted and b. Have the same <i>attached</i>). If two adopting par Date: Date: For stepparent ado If you are the legal I am the legal parent 	I will: d treated as my/our legal child (Fam. Color e rights and duties stated in the tribal cus rents, we agree to the other parent's adoption Type or print your name Type or print your name poptions only: I parent of the child listed in (2), read and and the spouse or regional contracts of the child and the spouse or regional contracts of the child and the spouse or regional contracts of the child and the spouse or regional contracts of the child and the spouse or regional contracts of the child and the spouse or regional contracts of the child and the spouse or regional contracts of the child and the spouse or regional contracts of the child and the spouse or regional contracts of the child and the spouse or regional contracts of the child and the spouse of the child contracts of the child contra	ode, § 8612(b)) and atomary adoption order dated(cop) ption of the child.			

Vour nomo	Case Number:				
Your name:					
8 Executed (check one):					
a. This form was signed outside of a hearing. (Select this opti spouse or partner who gave birth to the child during the ur good cause.)					
(1) \square This form was signed in California					
This form was signed in front of the following type of witness (check one):					
notary public (the notary acknowledgment is attack	hed)				
court clerk					
probation officer					
 qualified court investigator authorized representative of a licensed adoption age 	con au				
county welfare department staff member	ency				
(2) This form was signed outside of California					
This form was signed in front of the following type of	witness (check one):				
notary public (the notary acknowledgment is attack	hed)				
other person authorized to perform notarial acts (pr	roof of notarization is attached)				
\Box authorized representative of an adoption agency the	at is licensed in the state or country where this				
form was signed					
(3) Witness information					
This form was signed in: (county) (stat	(country)				
Name of witness:					
Agency witness works for (<i>if applicable</i>):					
Date:					
Witness signature:					

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 Judicial Officer)