

Clerk stamps below when form is filed.

Court name and street address:

Superior Court of California, County of

Case Number:

1 Your name(s) (adopting parent(s)):

- a. _____
b. _____

Relationship to child: _____

Your address (skip this if you have a lawyer):

Street: _____

City: _____ State: _____ Zip: _____

Your phone #: (_____) _____

Your lawyer (if you have one): (Name, address, phone #, and State Bar #):

2 Information about the child:

- a. Child's name (after adoption): _____
b. Date of birth: _____ Age: _____
c. Is the child a dependent of Juvenile Court? ☐ No ☐ Yes

If yes, Juvenile Court and Juvenile Case number:

County: _____ Case #: _____

- d. If the child has a lawyer, fill out below. If Item 2c is yes, child must have a lawyer (Fam. Code, § 8714.7).

Name of child's lawyer: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: (_____) _____ State Bar #: _____

3 The people below agree with the parent(s) in 1 about contact with the child after adoption. If the agreement is confidential, write "Confidential" instead of the person's name.

If other relatives, attach a sheet of paper. Write "ADOPT-310, Item 3—Other Relatives" at the top.

Name		Relationship to Child		Type of Contact (circle all that apply):					
				Telephone	Letter	Visits	Share Info	E-mail	Other*
a.									
b.									
c.									
d.									
e.									
f.									
g.									

*Explain type of contact on a sheet of paper. Write "ADOPT-310, Item 3—Other Types of Contact" at the top.

Number of pages attached: _____

Your name(s): _____

Case Number: _____

- 4
- If you have a signed, written agreement about Contact After Adoption, attach a copy.
Number of pages attached: _____
- 5
- The parties have discussed the reasons for the continued contact between the child and the specified relatives in view of the best interest of the child.

<p style="text-align: center;">Notice</p> <p>After the judge grants the Adoption Request and approves this agreement, the adoption is still valid. It can never be canceled or changed even if one of the people signing this agreement:</p> <ul style="list-style-type: none">■ Does not follow this agreement <i>and/or</i>■ Files ADOPT-315 (to change, end, or enforce this agreement) <p>When the adopted child turns 18, he or she can undo all or part of this agreement.</p>
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- 6
- Everyone involved in this agreement must sign below (including the child, if 12 or older, and the child’s attorney).

Date: _____	_____	➤	_____
	Type or print your name and relationship to child		Sign your name
Date: _____	_____	➤	_____
	Type or print your name and relationship to child		Sign your name
Date: _____	_____	➤	_____
	Type or print your name and relationship to child		Sign your name
Date: _____	_____	➤	_____
	Type or print your name and relationship to child		Sign your name
Date: _____	_____	➤	_____
	Type or print your name and relationship to child		Sign your name

If more relatives need to sign, attach a sheet of paper. Write “ADOPT-310, Item 6—Signatures of Other Relatives,” at the top.
Number of pages attached: _____

Date: _____	_____	➤	_____
			Judge (or Judicial Officer)