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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address)*:   |  | | --- | | **NAME OF ADOPTING PARENT** | | **STREET ADDRESS** | | **CITY, STATE, ZIP** | | **NAME OF ADULT BEING ADOPTED**  **STREET ADDRESS**  **CITY, STATE, ZIP** |  |  |  |  | | --- | --- | --- | | TELEPHONE NO: |  | FAX NO. (Optional): | | E-MAIL ADDRESS *(Optional)*: |  |  | | ATTORNEY FOR *(Name)*: |  |  | | | *FOR COURT USE ONLY* |
| **SUPERIOR COURT OF CALIFORNIA, COUNTY OF MADERA** | |
| STREET ADDRESS:  MAILING ADDRESS:  CITY AND ZIP CODE:  BRANCH NAME: | 200 South G Street  200 South G Street  Madera, CA 93637  Juvenile Division |
| IN THE MATTER OF THE ADOPTION PETITION OF: **NAME OF ADULT BEING ADOPTED** | |
| **ADULT ADOPTION AGREEMENT** | | CASE NUMBER: |

**NAME OF ADOPTING PARENT** age**INSERT AGE**, which lives at **STREET, CITY, ZIP CODE**, and **NAME OF ADULT BEING ADOPTED**, age**INSERT AGE**, which lives at **STREET, CITY, ZIP CODE**, have entered into the following agreement:

WHEREAS, **NAME OF ADOPTING PARENT** wishes to adopt **NAME OF ADULT BEING ADOPTED**, and **NAME OF ADULT BEING ADOPTED** wishes to be adopted by **NAME OF ADOPTING PARENT**,

THEREFORE, the parties agree as follows:

1. To assume toward each other the legal relation of parent and child, and to have all the duties and responsibilities of that relation;

2. To file a joint petition in the Superior Court of California, County of Sacramento, praying for approval of this Agreement of Adoption by issuance of a decree of adoption.

Dated: **DATE SIGNED**            \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NAME OF ADOPTING PARENT**

Dated: **DATE SIGNED** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NAME OF ADULT BEING ADOPTED**