

ONTARIO

Court File Number

(Name of court)

at
Court office address**Form 34B: Non-Parent's
Consent to Adoption
by Spouse****Applicant(s) (The first letter of the applicant's surname may be used)**

Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).

Lawyer's name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).

Respondent(s) (If there is a respondent, the first letter of the respondent's surname may be used)

Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).

Lawyer's name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).

1. My name is (full legal name)
and I live in (municipality & province)
2. The applicant is my "spouse" within the meaning of Part VIII of the *Child, Youth and Family Services Act, 2017*.
3. I am not a "parent" of the child in this case within the meaning of Part VIII of the *Child, Youth and Family Services Act, 2017*.
4. I consent to the adoption of: (Give full legal name, date of birth, sex and birth registration number if known of person to be adopted. If this person is in extended society care or was placed for adoption by a licensee or children's aid society, you may use an initial for the surname.)

Full legal name

Date of birth

Sex

Birth registration number

by my spouse (spouse's full legal name)

Date of signatures

Signature of non-parent

Signature of independent lawyer

NOTE: This consent must be witnessed by an independent lawyer who is to provide an affidavit of execution and independent legal advice on the next sheet of this form.

AFFIDAVIT OF EXECUTION AND INDEPENDENT LEGAL ADVICE

My name is (full legal name) _____

and I swear/affirm that the following is true:

1. I am a member of the Bar of (name of jurisdiction) _____
and I am not acting for any other person in this adoption case.
2. I explained to (non-parent's full legal name) _____ about
the nature and effect of adoption under the law of Ontario;
the nature and effect of this consent;
the circumstances under which this consent may be withdrawn; and
the right to counselling.
3. After my explanation, he/she told me that he/she wanted to sign this consent.
4. I was present at and witnessed the signing of this consent.

Sworn/Affirmed before me at _____
municipality

in _____
province, state or country

on _____
date _____ *Commissioner for taking affidavits*
(Type or print name below if signature is illegible.)

Signature

*(This form is to be signed in front of a lawyer,
justice of the peace, notary public or commissioner
for taking affidavits.)*