

# ADOPT-310

## Contact After Adoption Agreement

Original  Change

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.*

**Type of Contact** (circle all that apply):

Telephone Letter Visits

Share Info E-mail Other\*

Name	Relationship to Child						
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.


**Notice**


**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:**


- Does not follow this agreement *and/or*
- Files ADOPT-315 (to change, end, or enforce this agreement)


**When the adopted child turns 18, he or she can undo all or part of this agreement.**


- 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*

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)*