

STATE OF MAINE

PROBATE COURT

County: _____

Docket No. _____

DISTRICT COURT

Location: _____

Docket No. _____

In the Matter of the Adoption Petition of:

Name of Adoptee

WAIVER OF NOTICE BY PUTATIVE PARENT

18-C M.R.S. § 9-201(3)

1. I, _____ (*name*), understand that I have been named the putative parent of _____ (*name of adoptee*) who is the child of, _____ (*name of legal parent(s)*). I understand that the legal parent(s) wish(es) to consent to the adoption of the child or to sign a surrender and release for the purpose of allowing this child to be adopted, and that a petition for adoption of this child is pending in this court.
2. Check one of the following:
 I admit that I am a biological parent of the child.
 I neither admit nor deny that I am a biological parent of the child.
3. I understand that by signing this waiver of notice it will operate as a consent to the adoption of the child or as a surrender and release for the purpose of adoption. I also understand that I will give up any rights to the child if the adoption is granted.
4. I understand that unless one of the adopting parents is the other biological parent of my child, my child will lose all legal rights to inherit from me and my kin or heirs unless I request otherwise prior to this adoption or surrender and release. I therefore request do not request that my child be entitled to inherit from me and my kin or heirs.
5. Acknowledging the above, I hereby waive all rights to notice of this adoption proceeding.

Dated: _____

Signature of putative parent

EXECUTION OF WAIVER

_____ COUNTY

Personally appeared the above named putative parent, _____, who, under penalty of perjury, affirmed under oath that the foregoing statements in this waiver of notice are true to the best of the putative parent's knowledge and has executed this waiver of notice freely and with full knowledge of the consequences stated in the waiver as of the date written above.

Before me,

Date: _____

Judge / Attorney at Law / Notary Public / Register / Clerk