

Department for Children and Families
Family Services Division
Vermont Adoption Registry
280 State Drive
Waterbury, VT 05671-1030
www.dcf.vt.gov/fsd

[phone] 802-241-0906
[fax] 802-241-0914

Agency of Human Services

Statement About The Release Of Identifying Information

I hereby make the following statement about the release of identifying information to **my child**:

- I **consent** to the release of this information.
- I **do not consent** to the release of this information. *I understand that a judge may decide to release this information for important reasons (e.g. medical) even though I requested confidentiality.*

Child's Birth/Former Name: _____

Date of Birth: _____ Place of Birth: _____

Parent's Full Name: _____

Parent's Previous names : _____

Your Current Address: _____

Phone: () _____ Date of Birth: _____

Social Security: _____ Drivers License: # _____ State _____

Email: _____

I understand that I may change my mind about the choice I made above at any time prior to the release of identifying information by writing to: Adoption Registry, 280 State Drive, Waterbury, VT 05671-1030.

Parent's Signature _____

Sworn before me at _____ on this _____ day of _____ 20_____

_____ My commission expires on _____

Notary Public

Note to Notary: Please use stamp or seal.

Mail completed & notarized form to: Vermont Adoption Registry, 280 State Drive, Waterbury, VT, 05671-1030