

FORM 13

(Family Services Act, S.N.B. 1980, c.F-2.2, s.75(1))

Court File Number

IN THE COURT OF QUEEN'S BENCH OF NEW BRUNSWICK

FAMILY DIVISION

JUDICIAL DISTRICT OF

APPLICATION FOR AN ADOPTION ORDER

(given name(s) of child and initial letter of surname (the "child"))

birthdate sex place of birth birth registration number

Applicant(s): (if more than one applicant, give name and address of each.)

full name full name

address for service address for service

telephone telephone

solicitor (If represented by a solicitor, give full name, address and telephone number.)

- 1. I(We) hereby make application for an adoption order effecting the adoption of the child.
2. Provide the following information concerning the adoptive parent(s):
(a) name;
(b) sex;
(c) birthdate;
(d) place of residence;
(e) occupation; and
(f) if related to the child, nature of relationship.

- 3. Provide the following information where adoptive parents are married:
(a) date of marriage; and
(b) place of marriage.

4. I(We) request that the name of the child after the adoption be

5. The application is made for the following reasons (list):

DATED at, this day of, 20

(signature of applicant)

(signature of applicant)