

SCHEDULE 3

Regulation 6(2)

PRESCRIBED NOTICE FOR ENTRY IN PART 1 OF THE ADOPTION CONTACT REGISTER

I [full name] of [address], [date of birth], wish to have my name and address entered in Part 1 of the Adoption Contact Register.

I wish to contact the following relative(s):

[relative(s) and, if known, name(s) of the relative(s)]

I do not wish to contact the following relative(s):

[relative(s) and, if known, name(s) of the relative(s)]

I understand that I may withdraw this notice at any time.

Date:

Signed: