

NO. _____

IN THE INTEREST OF

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IN THE DISTRICT COURT

_____JUDICIAL DISTRICT

A CHILD

BEXAR COUNTY, TEXAS

**IRREVOCABLE MOTHER'S AFFIDAVIT OF RELINQUISHMENT
OF PARENTAL RIGHTS TO A LICENSED CHILD-PLACING AGENCY**

STATE OF TEXAS §

BEFORE ME, the undersigned authority, on this day personally appeared _____, who being by me duly sworn, in the presence of the undersigned credible witnesses made the following statements and swore that they were true:

"My name is _____. My age is ____ years. My address is _____.
My social security number is _____. I am the mother of the following child (ren):

"_____, a male / female child born on _____,
at ____: ____ a.m. / p.m., in (city)_____, (state) _____.

"No person has been appointed or has qualified as guardian of the person(s) or estate(s) of the child(ren). I am not presently obligated by court order to make payments for support of the child(ren). There is no property owned or possessed by the child(ren).

_____ "The child has no presumed (legal) father, and I have executed an affidavit of status of the child.

_____ "The name of the presumed father is _____, and his address is _____.

_____ "The child has a presumed father who may or may not be the probable biological father and I have executed an affidavit of status of the child.

"It is in the best interest of the child(ren) that the child(ren) be placed for adoption in a suitable home by an agency licensed by the Texas Department of Protective and Regulatory Services to place children for adoption. I therefore designate ABRAZO ADOPTION ASSOCIATES, an agency licensed by the Texas Department of Protective and Regulatory Services to care for children or to place children for adoption, as managing conservator of my child(ren). I have been informed that my parental rights, privileges, powers, and duties are as follows:

1. the duty to support the child(ren), including providing the child(ren) with clothing, food, shelter, medical care, and education;
2. the right to have physical possession, to direct the moral and religious training, and to establish the legal domicile of the child(ren);
3. the duty of care, control, protection, and reasonable discipline of the child(ren);
4. the duty to manage the estate(s) of the child(ren), except when a guardian of the estate has been appointed;
5. the right to the services and earnings of the child(ren);
6. the power to consent to marriage, to enlistment in the Armed Forces of United States, and to medical, psychiatric, and surgical treatment;
7. the power to represent the child(ren) in legal action and to make other decisions of substantial legal significance concerning the child(ren);
8. the power to receive and give receipt for payments for the support of the child(ren) and to hold or disburse any funds for the benefit of the child(ren);
9. the right to inherit from and through the child(ren); and
10. any other rights, privileges, duties, and powers existing between a parent and child (ren) by virtue of law.

I freely, voluntarily, and permanently give and relinquish to the above-named agency all of my parental rights, privileges, powers, and duties. I consent to the placement of the child(ren) for adoption by this agency.

Relinquishment of Parental Rights

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"I fully understand that a lawsuit will be promptly filed in a court of competent jurisdiction to terminate forever the parent-child relationship between me and the above-named child(ren). I fully understand that the termination suit may or may not be combined with a suit to adopt my child(ren). I understand that either way, once the Court terminates my parental rights, I have no further say concerning my child(ren), whether or not my child(ren) is/are adopted then or at some later time.

"I know that I have the right to appear personally before the Court, with an attorney of my choice, to testify about my desires with respect to my child(ren). However, I do not want to go to court in person. I have been encouraged to seek independent legal advice, and have already done so if I felt that this was necessary. I now want ABRAZO ADOPTION ASSOCIATES to present this Affidavit of Relinquishment of Parental Rights to the Court.

"Because I do not want to testify in person before the court, I freely and voluntarily waive and give up my right to the issuance, service, and return of citation, notice, and all other process in any suit to terminate my parental rights or in any suit to terminate my parental rights joined with a suit to adopt. I do not want to be informed further about the lawsuit, and I waive and give up my right to be given notice about anything going on in the lawsuit. I specifically agree that a final hearing in the lawsuit may be held at any time without further notice to me. I waive and give up my right to my right to have the official court reporter make a record of the testimony in the lawsuit. Furthermore, I do not want to be mailed or given a copy of the judgment terminating my parental rights and do not want to be notified of the signing, rendition, or entry of that judgment. Therefore, I waive and give up my right to insist that those things be done. I also consent to have any suit affecting the parent-child relationship filed or to be filed with respect to the above-identified child (ren) be decided by a family law master appointed pursuant to section 201.001 of the Texas Family Code.

"If I am in the armed services of the United States at this time, that fact in no way has interfered with my freedom to make my decision to execute this affidavit, and, insofar as this matter is concerned, I waive all rights, privileges, and exemptions existing or that may hereafter exist in my favor under the Soldiers' and Sailors' Civil Relief Act of 1940, including the appointment of counsel to represent me in this cause.

"I FULLY UNDERSTAND THAT I WILL NOT BE FURTHER INFORMED ABOUT THE TERMINATION OF SUIT OR ABOUT ANY OTHER HEARINGS OR PROCEEDINGS AFFECTING THE CHILD(REN) NAMED IN THIS AFFIDAVIT.

"Termination of the parent-child relationship between me and the child(ren) so that the child(ren)

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may be placed for adoption and adopted is in the best interest of the child(ren). I understand that I make this termination possible by executing this affidavit. With that in mind, I hereby declare that this Affidavit of Relinquishment of Parental Rights is and shall be final, permanent and irrevocable.

"I FULLY UNDERSTAND THAT, IF I CHANGE MY MIND AT ANY TIME, I CAN NEVER FORCE THE AGENCY TO DESTROY, REVOKE OR RETURN THIS AFFIDAVIT AND THAT I CANNOT TAKE BACK OR UNDO THIS AFFIDAVIT IN ANY WAY.

"I have carefully considered alternative plans for my child(ren)'s future and have obtained the advice of whatever family members, friends, or other persons and professionals I felt were necessary to help me make this decision. This decision is very difficult for me to make, and under other circumstances I might have made a different decision. Nevertheless, under the circumstances I find myself in, I have decided that I cannot provide properly for the child(ren)'s physical and emotional needs, and I want ABRAZO ADOPTION ASSOCIATES, to select a permanent home for the child(ren) and to place the child(ren) in that home to be adopted. As I sign this Affidavit of Relinquishment of Parental Rights, I know that ABRAZO ADOPTION ASSOCIATES, in accepting my child(ren) for adoptive placement and assuming responsibility for my child(ren), is relying on my promise that I will not attempt to reclaim my child(ren). With this in mind, I declare that I fully understand the meaning of this affidavit of relinquishment and the finality of my action in signing it and, understanding all this, I am signing it freely, voluntarily, and with the firm conviction that this decision is the best available alternative for my child(ren).

"I am signing this affidavit today because I want to sign it and not because ABRAZO ADOPTION ASSOCIATES, or any other person or persons want me to sign it. I am ready emotionally and in every other way to make the decision I am making today.

"I am signing this affidavit in the presence of the two undersigned witnesses, each of whom is known by me to be a credible person and each of whom is present and acting as a witness. I want them to be here and to witness my signature. I am also signing this affidavit before a notary public who has asked me under oath whether or not each and every statement in this affidavit is true and correct and advised me not to sign it unless it is.

_____ "I REALIZE THAT I SHOULD NOT SIGN THIS AFFIDAVIT UNTIL I
_____ HAVE READ AND UNDERSTOOD EACH WORD, SENTENCE, AND
_____ PARAGRAPH IN IT. I REALIZE THAT I SHOULD NOT SIGN THIS
_____ AFFIDAVIT OF RELINQUISHMENT IF THERE IS ANY THOUGHT IN
_____ MY MIND THAT I MIGHT SOMEDAY SEEK TO CHANGE MY MIND. I
_____ REALIZE THAT I SHOULD NOT SIGN THIS AFFIDAVIT OF
_____ RELINQUISHMENT IF I AM NOT THINKING CLEARLY BECAUSE OF
_____ ILLNESS, MEDICATION, MY EMOTIONAL STATE, OR ANY OTHER
_____ REASON. BECAUSE I REALIZE HOW IMPORTANT THIS DECISION
_____ IS FOR THE FUTURE OF MY CHILD(REN), I HAVE PUT MY INITIALS
_____ BESIDE EVERY LINE OF THIS PARAGRAPH SO THAT IT WILL
_____ ALWAYS BE UNDERSTOOD THAT I HAVE READ THIS AFFIDAVIT
_____ OF RELINQUISHMENT, UNDERSTAND IT, AND DESIRE TO SIGN IT."

SIGNED on this _____ day of _____, _____ at _____: _____ a.m. / p.m.

Affiant

WITNESSES:

Signature

Signature

Address

Address

VERIFICATION

STATE OF TEXAS §

BEFORE ME, the undersigned notary public, on this day personally appeared _____, who, being by me duly sworn on her oath, deposed and said that she is the affiant and that she has read the foregoing Irrevocable Affidavit of Relinquishment of Parental Rights to Licensed Child-Placing Agency and that the statements contained therein are within her personal knowledge and are true and correct.

This Irrevocable Affidavit of Relinquishment of Parental Rights to Licensed Child-Placing Agency was subscribed and sworn before me on this _____ day of _____, _____, by the affiant.

Notary Public, State of Texas