



Disclosure To Expectant Parent and Waiver

Because I am making an adoptive placement plan, I give permission to apply for clearance from the Adoption Information Clearinghouse (AIC). I am providing information about myself, some or all of which may be confidential, to an attorney, agency or other provider of adoption services. I understand this information will be compared with other information in the AIC database.

If I have not requested financial assistance for any adoption situation, or have not committed to any other adoptive family for this same placement, then I should receive an AIC clearance number ("CN"). However, if I have made a request for financial assistance for any adoption situation before this one, or have committed to another adoptive family for this same placement, depending on the circumstances, I may not receive a CN. Instead, further inquiry may be made into my previous requests for financial assistance or commitments to other adoptive families as well as any other prior requests that I may have made. Unless there are legitimate reasons for any prior requests, I understand that my request for a CN may be denied.

I agree that the information I provided to AIC may be shared with a limited number of participating AIC attorneys and adoption agencies, or other providers of adoption services and governmental officials, as may be necessary to determine whether there have been prior requests or commitments or to resolve any errors or misidentification. I agree to cooperate in this process. I understand I may need to provide further information to AIC so I may receive the requested AIC clearance.

I promise that I have not provided any false or misleading information of any kind including information about myself, my identity or the validity of my identification documents. I understand that working at the same time with more than one attorney, agency or adoptive parent(s), or making previous or current inappropriate requests for financial assistance may subject me to criminal and/or civil penalties. I recognize that the persons and/or entities utilizing the AIC may have a duty to report fraudulent or criminal behavior to the appropriate authorities.

I understand attorneys, adoption agencies and others involved in the planned adoption will rely on the information I have provided in making a determination to proceed with the planned adoption. Other governmental officials, including the courts and law enforcement authorities, may also rely on the accuracy of my information. I hereby waive any claim of privilege or privacy for the information I have provided to the AIC. I agree that the information provided to the AIC may be freely disclosed to the adoptive parent(s), their agency and their attorney.

I agree that I will not bring any lawsuit or claim arising out of my application to the AIC. I fully release all persons and entities involved with the use of such information by AAAA, AIC or any of the participants in the AIC process.

Date _____

Signature of Expectant Parent

Signature of Witness

Print Name

Print Name