

Contact Preference

Birth parents must complete and sign a separate contact preference for each child placed for adoption. Contact preferences do not apply to step-parent adoptions or adoptions of adults.

I am the: <input type="checkbox"/> Birth Mother <input type="checkbox"/> Birth Father <input type="checkbox"/> Adult Adoptee				
Current Surname		First Name		Middle Name
Previous Surnames (e.g. Maiden Name)				Date of Birth (yyyy/mmm/dd)
Street/Box Number	Street Name	City/Town	Province	Postal / Zip Code
Country	Home Phone (include area code)	Work Phone (include area code)	Cell Phone (include area code)	
Email Address				

Birth Information (Complete all known information)		
Adoptee's Birth Name	Date of Birth (yyyy/mmm/dd)	Adoptee's Place of Birth
Birth Mother's Name (at time of adoption)		Birth Father's Name
Adoptive Parent's Name		Adoptive Parent's Name

Contact Preference Agreement (Indicate the type of contact you prefer)	
<input type="checkbox"/> No contact	Contact at this Phone Number (include area code) <input type="checkbox"/> Contact at this Email <input type="checkbox"/>
<input type="checkbox"/> Other Method of Contact (e.g. through a third-party as indicated)	

Declaration – By signing my name, I understand the collection, use and disclosure of information is done under the authority of *The Adoption Act, 1998*. I acknowledge the following:

- i. The purpose of my contact preference is to notify the other person how or if I wish to be contacted.
- ii. The Post-Adoption Registry cannot guarantee the other person will follow the terms of my contact preference.
- iii. I may amend or withdraw my contact preference by submitting a new form to the Post-Adoption Registry. If I amend or withdraw my contact preference, the Post-Adoption Registry will contact any other party accordingly.
- iv. My contact preference will no longer be valid upon my death.
- v. I am able to voluntarily provide a written statement of current family medical information, which the Post-Adoption Registry may share with the individuals I indicate. My written statement is: included not included.

Signature _____ Date _____

If your information changes, contact the Post-Adoption Registry to update your file.

Attach a clear copy of one (1) current government-issued ID with your application (e.g. Driver's Licence).

ID included: Driver's Licence Passport Birth Certificate Health Card Other

Office Use Only
Date Received: _____ LA Number: _____

Contact Preference

- An adopted adult may submit a request of a contact preference in writing.
- A birth parent may submit a contact preference, in writing, at any time after a child is placed for adoption.
- If either the adopted adult or birth parent submit a contact preference, the adopted adult's birth registration may not be released until the person who is applying for the birth registration agree to follow the terms of the contact preference.
- The contact preference does not, in itself, prevent names and other identifying information from being released.

The terms of the contact preference may be amended or terminated at any time by making a written request to the Post-Adoption Registry:

Saskatchewan Post-Adoption Registry

10th Floor, 1920 Broad Street

Regina, SK S4P 3V6

Phone: (306) 787-3654

Toll-free: 1-800-667-7539

Fax: (306) 798-0038

Email: postadoptionregistryinsask@gov.sk.ca