

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile Court _____ County, Colorado Court Address: _____ <b>IN THE MATTER OF THE PETITION OF:</b>  <b>FOR THE ADOPTION OF A CHILD</b>		▲ <b>COURT USE ONLY</b> ▲
Attorney or Party Without Attorney (Name and Address): _____  Phone Number: _____                      E-mail: _____ FAX Number: _____                         Atty. Reg.#: _____	Case Number: _____  Division                      Courtroom	
<b>CONSENT TO ADOPTION – CHILD OVER TWELVE YEARS OF AGE</b>		

I hereby consent to my adoption by \_\_\_\_\_  
and waive any and all notices required by law.

I am \_\_\_\_\_ years of age and my date of birth is \_\_\_\_\_.

Date: \_\_\_\_\_  
\_\_\_\_\_  
Adoptee

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My commission expires: \_\_\_\_\_  
\_\_\_\_\_  
Deputy Clerk/Notary Public