



## ACKNOWLEDGMENT RECEIPT

I / We have received and read the following:

1. a copy of "Letter of Understanding"
2. a copy of "Adoptive Parent Agreement"
3. a copy of "Fee Schedule"
4. a copy of "Interstate Compact Process"
5. a copy of "Adoption Taxpayer Identification Number"

I/We understand these documents are very important. I/We further understand these documents will be made part of my/our permanent adoption case file. I/We fully understand these documents. I/We further understand that should I/We have any questions, I/We should discuss them with my /our attorney or a representative of my home agency prior to signing below. I/We understand The Adoption Alliance cannot be held responsible should a birth parent decide to parent his/her child. I/We understand it is my/our responsibility to insure my/our case file documentation is kept current.

Home Study must be updated by my/our Social Worker documenting a visit to my/our home within six months of placement if my child is born in Texas.

### ADOPTIVE FATHER

### ADOPTIVE MOTHER

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name