

4. Name of the Co-Petitioner _____
First Name MI Last Name

The Co-Petitioner's current address:

(Address) (Apt, Unit, No. etc.) (City/Town) (State) (Zip)

Primary Phone #: _____ E-mail: _____

The Co-Petitioner signed a gestational surrogacy agreement and is the Intended Parent. Surrogate.

Surrogate's Spouse.

INFORMATION ABOUT THE CHILD

5. The Child has not been born yet. The Child is expected to be born on: _____ at _____.
(Month/Year) (location)

OR

The Child was born on _____ at _____. The Child's current age: _____.
(date) (location)

6. The Child's current address:

(Address) (Apt, Unit, No. etc.) (City/Town) (State) (Zip)

FACTS RELEVANT TO ADJUDICATION

7. The Petitioner and all Co-Petitioners, signed a gestational surrogacy agreement that meets all the requirements of G. L. c.209C, §§ 28A, 28B, and 28C.

OR

The Petitioner and all Co-Petitioners signed a gestational surrogacy agreement which this Court cannot certify as required by G. L. c. 209C, § 28I(d), because of a technical or non-material deviation from the requirements of G. L. c. 209C, §§ 28A, 28B, and 28C, as follows:

The gestational surrogacy agreement is in substantial compliance with G. L. c. 209C, §§ 28A, 28B, and 28C, and should be enforced pursuant to G. L. c. 209C, § 28I(f).

A copy of the executed gestational surrogacy agreement and a copy of the certifications of the attorneys representing the Petitioners and all Co-Petitioners are attached to the petition.

8. The Petitioner and all Co-Petitioners certify that any pregnancy or subsequent birth of the Child occurred after using assisted reproduction.

A copy of an affidavit from the assisted reproduction physician is attached to this petition.

9. None of the Petitioners have properly terminated the surrogacy agreement under G. L. c.209C, § 28F.

REQUESTS TO THE COURT

The Petitioner and all Co-Petitioners request, pursuant to G. L. c. 209C, § 28I, that this Court issue a judgment as follows:

10. Declaring that the Intended Parent(s) listed above is the exclusive legal parent(s) with full parental rights and responsibilities associated therewith; upon the birth of the minor Child who is not yet born was born on

_____ at _____.
(Month/Year) (location)

11. Declaring that the Surrogate and the Surrogate's spouse, if any, are not the parents of the Child.

12. Ordering that the Child's birth certificate reflect that the Intended Parent(s) is the Child's parent(s) and ordering the Department of Public Health to designate the Intended Parent(s) as the Child's parent(s).

13. Ordering the name of the Child be changed on their birth certificate to:

First Name

Middle Name

Last Name

14. Ordering that a birth certificate be issued pursuant to G. L. c. 46 and G. L. c. 209C, § 28.

15. Ordering the court proceedings be closed to the general public and all related pleadings be segregated.

16. Ordering that the Child be surrendered to the Intended Parent(s).

17. Order that the hospital where the Child will be or has been born, treat the Intended Parent(s) as the sole legal parent(s) for the purpose of naming and medical decisions.

18. Ordering other relief the Court determines necessary and proper.

Date: _____

Date: _____

Signature of Petitioner

Signature of Co-Petitioner

(Print name)

(Print name)

Date: _____

Date: _____

Signature of Co-Petitioner

Signature of Co-Petitioner

(Print name)

(Print name)

Information on Attorney(s) for Petitioner(s), if any:

Signature of Attorney (Petitioner)

Signature of Attorney (Co-Petitioner)

(Print name)

(Print name)

(Address) (Apt, Unit, No. etc.)

(Address) (Apt, Unit, No. etc.)

(City/Town) (State) (Zip)

(City/Town) (State) (Zip)

Primary Phone #: _____

Primary Phone #: _____

B.B.O. # _____

B.B.O. # _____

E-mail: _____

E-mail: _____

Signature of Attorney (Co-Petitioner)

(Print name)

(Address)

(Apt, Unit, No. etc.)

(City/Town)

(State)

(Zip)

Primary Phone #: _____

B.B.O. # _____

E-mail: _____

Signature of Attorney (Co-Petitioner)

(Print name)

(Address)

(Apt, Unit, No. etc.)

(City/Town)

(State)

(Zip)

Primary Phone #: _____

B.B.O. # _____

E-mail: _____