

STATE OF VERMONT

SUPERIOR COURT

PROBATE DIVISION

Unit

Case No. _____

VERIFIED PETITION FOR BIRTH ORDER

In re:

[Empty box for case name]

Petition filed: Pre-Birth Post-Birth

1. Petitioner/Intended A Information

Name: _____ Date of Birth: _____
Street Address: _____ City/State/Zip: _____
Mailing Address (if different from Street Address): _____
City/State/Zip: _____ Email Address: _____
Daytime Phone: _____ Evening Phone: _____
Attorney Name: _____ Attorney Phone: _____

Petitioner A is (check all that apply)

- The birth parent
 Intended parent
 Other: state the nature of parental relationship to the child _____

2. Petitioner/Intended B Information

Name: _____ Date of Birth: _____
Street Address: _____ City/State/Zip: _____
Mailing Address (if different from Street Address): _____
City/State/Zip: _____ Email Address: _____
Daytime Phone: _____ Evening Phone: _____
Attorney Name: _____ Attorney Phone: _____

Petitioner B is (check all that apply)

- The birth parent
 Intended parent
 Other: state the nature of parental relationship to the child: _____

3. Other possible parent, if any (notice will be sent)

Name: _____ Date of Birth: _____
Street Address: _____ City/State/Zip: _____
Mailing Address (if different from Street Address): _____
City/State/Zip: _____ Email Address: _____
Daytime Phone: _____ Evening Phone: _____
Attorney Name: _____ Attorney Phone: _____

Other party is (check all that apply)

- The birth parent
 Intended parent
 Other: state the nature of parental relationship to the child _____

4. Anticipated OR Actual last name of the child, if any: _____
Anticipated OR Actual Delivery or Birth Date: _____
Anticipated OR Actual Place of Birth or Delivery: _____
Anticipated OR Actual place of residence of the minor: _____

5. Petitioner A and Petitioner B are OR are not married.

I/We, request that a Birth Order be issued for _____ and _____
parent name parent name

and that Parental Rights and Responsibilities be granted exclusively to them after the child is born. The facts that support my request are:

Stipulated by: _____

Stipulation Attached

I declare that the above statements are true and accurate to the best of my knowledge and belief. I understand that if the above statements are false, I will be subject to the penalty of perjury or to other sanctions in the discretion of the court.

Date: _____

Signature of Petitioner A

Printed Name

Date: _____

Signature of Petitioner B

Printed Name

Date: _____

Signature of Other Party (if applicable)

Printed Name

List of Attachments Required for this Petition:

1. Verified Petition for Birth Order
2. Birth Certificate of all Petitioners/Intended Parents
3. Marriage Certificate, if applicable
4. If section 708 for Assisted Birth (IVF):
Consent to Parentage from Assisted Reproduction form, available from the Vermont Department of Health
5. If section 804 for Gestational Carriers (surrogacy):
Copy of the gestational carrier agreement and consents