

**Release of Infant to 3<sup>rd</sup> Party**

I, \_\_\_\_\_, being the mother and biological parent of \_\_\_\_\_, a minor, born at \_\_\_\_\_ Hospital in \_\_\_\_\_, Texas on \_\_\_\_\_, 200\_\_\_\_ do hereby:

1. Authorize, consent, and direct that said child be released from \_\_\_\_\_ hospital and delivered to \_\_\_\_\_ and/or \_\_\_\_\_, prospective adoptive parents.
2. Expressly release \_\_\_\_\_ Hospital from any liability, for the release and delivery of said child to such parties.

\_\_\_\_\_  
Affiant

WITNESSES:

\_\_\_\_\_  
Name of Witness (Please print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Name of Witness (Please print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Signature of Witness

STATE OF TEXAS  
COUNTY OF:

BEFORE ME, the undersigned authority, on this day, personally appeared \_\_\_\_\_ known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that she executed the same for the purposes and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires:  
\_\_\_\_\_

{SEAL}