



**Robert F. Kennedy  
Children's Action Corps**

**Bright Futures Adoption Center**

**ADOPTION SEARCH APPLICATION**

(Adopted Person)

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Adoptive Name (if different): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Best Telephone #: \_\_\_\_\_ Other Telephone #: \_\_\_\_\_

Email: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Adoptive Parent(s) Names: \_\_\_\_\_

SERVICES REQUESTED

- 1)  I have enclosed a signed consent giving my authorization to be contacted in the event that my birth parent(s) contacts the agency.
- 2)  I have enclosed information that I would like added to the file in the event that my birth parent(s) contacts the agency.
- 3)  Please review your files to determine if there is a release from my birth parent(s) on file.
- 4)  I would like all **non-identifying information** about my birth parent(s). This is descriptive information that can include any or all of the following: age, physical description, ethnicity, educational level, general type of employment, interests/hobbies, personality type, ages of other children, medical history, nature of my child's birth parents' relationship.
  - I request that all information be mailed to me.
  - I request an appointment at Bright Futures to receive the information.

**I have enclosed \$25.00 for this service.**

- 5)  I know the identity and whereabouts of my birth parent(s), or I know that there is a current release on file, and I would like Bright Futures to make the initial contact.

**I have enclosed \$150.00 for up to three hours for this service.**

- 6)  I would like Bright Futures to conduct a search for my:
  - birth mother
  - birth father
  - sibling(s)
  - any relative

**I have enclosed \$250.00 for up to five hours for this service.**

*I understand that there is a fee of \$50.00 per additional hour beyond the initial time indicated for services 5 and 6, and I will be billed later if applicable.*

**Please: Make check payable to RFK Children's Action Corps; Read Grievance Policy and Procedure; and Complete and sign the attached Consent Form before a notary.**

**5 Broadview Street, Acton, MA 01720, 978-263-5400 (phone),  
978-266-1909 (fax), [www.bright-futures.org](http://www.bright-futures.org), [www.rfkchildren.org](http://www.rfkchildren.org)**