



TODAY'S DATE: _____

ADOPTIVE FAMILY INFORMATION FORM

NAME: _____ EMAIL: _____

ADDRESS: _____

YOUR IDENTITY: PLEASE ✓ CHECK ALL THAT APPLY.

- Adoptive Parent
- Birth Mother
- Teen Adoptee
- Adoptive Grandparent
- Adult Adoptee
- Other _____

TYPE(S) OF ADOPTION IN YOUR FAMILY: PLEASE ✓ CHECK ALL THAT APPLY.

- Private OPEN
- Private CLOSED
- Step-Parent
- Domestic AGENCY
- State FOSTER CARE
- INTERNATIONAL - Country? _____

YOUR CHILD(REN):

NAME	AGE(S) ADOPTED	CURRENT AGE(S)	✓ CHECK ONE	NAME	AGE(S) ADOPTED	CURRENT AGE(S)	✓ CHECK ONE
_____	_____	_____	<input type="checkbox"/> BIRTH <input type="checkbox"/> FOSTER <input type="checkbox"/> ADOPTED	_____	_____	_____	<input type="checkbox"/> BIRTH <input type="checkbox"/> FOSTER <input type="checkbox"/> ADOPTED
_____	_____	_____	<input type="checkbox"/> BIRTH <input type="checkbox"/> FOSTER <input type="checkbox"/> ADOPTED	_____	_____	_____	<input type="checkbox"/> BIRTH <input type="checkbox"/> FOSTER <input type="checkbox"/> ADOPTED
_____	_____	_____	<input type="checkbox"/> BIRTH <input type="checkbox"/> FOSTER <input type="checkbox"/> ADOPTED	_____	_____	_____	<input type="checkbox"/> BIRTH <input type="checkbox"/> FOSTER <input type="checkbox"/> ADOPTED
_____	_____	_____	<input type="checkbox"/> BIRTH <input type="checkbox"/> FOSTER <input type="checkbox"/> ADOPTED	_____	_____	_____	<input type="checkbox"/> BIRTH <input type="checkbox"/> FOSTER <input type="checkbox"/> ADOPTED

How did you hear about CHOSEN International? _____

Would you like to be notified of: TEEN CAMPS ADOPTEE SUPPORT GROUPS ADOPTIVE PARENT SUPPORT GROUPS ADOPTIVE PARENT CONFERENCE

Any areas of special concern you would like to see Chosen International address? _____

...educating, encouraging, empowering those whose lives are touched by adoption.

MAILING ADDRESS: CHOSEN INTERNATIONAL • P.O. BOX 5515 • GRANTS PASS, OREGON 97527

For more up-to-date information on Chosen International please visit our website: www.ChosenInternational.org