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<table>
<tr><td>To be inserted by Court</td></tr>
<tr><td>Case Number:</td></tr>
<tr><td>Date Filed:</td></tr>
<tr><td>FDN:</td></tr>
</table>

Hearing Date and Time:

Hearing Location:
75 Wright Street Adelaide

ORIGINATING APPLICATION - ORDER AS TO PARENTAGE OF A CHILD BORN UNDER A RECOGNISED SURROGACY AGREEMENT

Surrogacy Act 2019 s 18(1)

YOUTH COURT OF SOUTH AUSTRALIA
SURROGACY JURISDICTION

IN THE MATTER OF [*NAME[S] OF CHILD[REN*]]

Please specify the Full Name for each party. Each party should include a party number if more than one party of the same type.

First Intended Parent

Only displayed if applicable
Second Intended Parent

Surrogate/Birth Mother

Partner of Surrogate/Birth Mother

Only displayed if applicable
Other Party

Only one of the next two items display as applicable
ATTORNEY-GENERAL

CHIEF-EXECUTIVE

Birth Siblings
Mark appropriate section below with an 'x'

Does the child the subject of this application have any living birth siblings? [   ] Yes [   ] No

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Filed by the Intended Parent[*s*]

First Intended Parent	**Full name**
Second Intended Parent If applicable	**Full name**

Name of law firm / solicitor If any	**Law Firm**	**Solicitor**

Address for service	**Street Address (including unit or level number and name of property if required)**

City/town/suburb	**State**	**Postcode**	**Country**

Email address

Phone Details	**Type – Number**

Particulars of First Intended Parent

Name	**Full Name**
	Maiden Name (if applicable)
	Any other previous names (if applicable)
Birth Details	**Date of Birth**
	Place of Birth
Gender	[ ] Female [ ] Male [ ] Non-Binary [ ] Indeterminate/intersex/unspecified **Mark appropriate section with an 'x**
Date of present marriage/ qualifying relationship	[ ] Marriage [ ] Qualifying relationship [*specify date of commencement*] **Mark appropriate section with an 'x'**
Occupation	**Occupation**
Residential Address	**Street Address (including unit or level number and name of property if required)**

City/town/suburb	**State**	**Postcode**	**Country**

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Particulars of Second Intended Parent	
Name	**Full Name**
	Maiden Name (if applicable)
	Any other previous names (if applicable)
Birth Details	**Date of Birth**
	Place of Birth
Gender	[ ] Female [ ] Male [ ] Non-Binary [ ] Indeterminate/intersex/unspecified **Mark appropriate section with an 'x**
Date of present marriage/ qualifying relationship	[ ] Marriage [ ] Qualifying relationship [*specify date of commencement*] **Mark appropriate section with an 'x'**
Occupation	**Occupation**
Residential Address	**Street Address (including unit or level number and name of property if required)**

	City/town/suburb	State	Postcode	Country

Surrogate/Birth Mother	
Name	**Full Name**
	Maiden surname (if applicable)
	Any other previous names (if applicable)
Address	**Street Address (including unit or level number and name of property if required)**

	City/town/suburb	State	Postcode	Country

	Email address
Phone Details	**Type – Number**

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Other Party	
Name	**Full Name** **Any other previous names (if applicable)**
Party Role	[ ] Partner of the Surrogate/Birth Mother [ ] Birth Father [ ] Other **Mark appropriate section with an 'x'**
Address	**Street Address (including unit or level number and name of property if required)**

Address (cont.)	City/town/suburb	State	Postcode	Country

	Email address
Phone Details	**Type - Number**

Child	
Name	**Full Name**
Date of Birth	**Date of Birth**
Gender	[ ] Female [ ] Male [ ] Non-Binary [ ] Indeterminate/intersex/unspecified **Mark appropriate section with an 'x'**
Place of Birth	**Place of birth**
Is the child an Aboriginal or Torres Strait Islander?	[ ] Yes [ ] No **Mark appropriate section with an 'x'**

Duplicate panel if multiple children

Application Details

Matter Type:

This Application is for an order as to parents of a child born under a recognised surrogacy agreement.
Nature of application in one sentence

This Application is made under section 18 of the Surrogacy Act 2019.
Note: Pursuant to section 18(2)(a), an application may only be made when the child is between the age of 30 days and 12 months.

The Intended Parent[*s*] seek the following orders:
Orders sought in separately numbered paragraphs.

1. That pursuant to section 18(1)(a) of the Surrogacy Act 2019, an order be made as to parents of a child born under a recognised surrogacy agreement concerning the abovenamed child.

Duplicate if multiple children

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2. That pursuant to section 18(1)(b) of the Surrogacy Act 2019, the child, [*name*] ,
   be known by the following name:
   SURNAME: [*name*]
   OTHER NAMES: [*name*]

3. [*any other orders sought in separately numbered paragraphs*]

This Application is made on the grounds set out in the accompanying affidavit sworn by
[*full name*]   on the   day of   20   .

To the other parties: WARNING

The Applicant has applied for orders set out in this Application.

The facts that support this Application are set out in the accompanying documentation.

This Application will be considered at the hearing at the date and time set out at the top of this document.

If you wish to oppose the application, or make submissions about it:
- you **must attend the hearing** and
- **you may be required to file a Response** at a later stage**.**

If you do not attend the Court hearing, orders may be made without further warning.

Service
Mark appropriate section below with an 'x'

The party filing this document is required to serve it on all other parties at least 5 clear business days prior to the next hearing, in accordance with the Rules of Court.

[   ] It is intended to serve this application on all other parties.

[   ] It is not intended to serve this application on the following parties: [*list names*]

      because [*reasons*]

Accompanying Documents
Mark appropriate sections below with an 'x'

Accompanying service of this Application is a:

[   ] Supporting Affidavit (mandatory)

[   ] If other additional document(s) please list below: