CHILD BORN UNDER A RECOGNOSED SURROGACY AGREEMENT

YOUTH COURT OF SOUTH AUSTRALIA SURROGACY JURISDICTION

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

Display the following items as applicable

First Intended Parent

Second Intended Parent

Surrogate/Birth Mother

Partner of Surrogate/Birth Mother

Other Party

Child

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

CHIEF EXECUTIVE

TO THE REGISTRAR OF BIRTHS, DEATHS AND MARRIAGES

TAKE NOTICE that on [date] in the Youth Court of South Australia sitting at Adelaide [an order as to parents of a child born under a recognised surrogacy agreement/an order discharging an order as to parents of a recognised surrogacy agreement dated [date]] was made in respect of the parties referred to below.

A copy of the [order as to parents of a child born under a recognised surrogacy agreement / order discharging an order as to parents of a recognised surrogacy agreement] is attached to this notice.

AND TAKE NOTICE that it was further ordered that the name by which the child is to be known is [name].

Child	
Name	
	Full Name
Date of Birth	
	Date of Birth
Gender	[Female/Male/Non-Binary/Indeterminate/intersex/unspecified]
Place of Birth	
	Place

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
Occupation	
	Occupation
Residential Address	
	Street Address (including unit or level number and name of property if required), City/town/suburb, State Postcode
Date of marriage of	r
qualifying relationship	Date

Particulars of Second Intended Parent	
Name	
	Full Name
	Maiden Name (if applicable)
	Any other previous names (if applicable)
Birth Details	
	Date of Birth

Form S7

	Place of Birth
Occupation	
	Occupation
Residential Address	
	Street Address (including unit or level number and name of property if required), City/town/suburb, State Postcode
Date of marriage or qualifying relationship	
	Date

Surrogate/Birth Mother	
Name	
	Full Name
	Maiden Name (if applicable)
	Previous Full Name (if applicable)
Residential Address	
	Street Address (including unit or level number and name of property if required), City/town/suburb, State Postcode

Only displayed if applicable

Only displayed if applicable	
Other Party	
Name	
	Full Name
	Maiden Name (if applicable)
	Previous Full Name (if applicable)
Party Role	[Partner of the Surrogate or Birth Mother/Birth Father]
Residential Address	
	Street Address (including unit or level number and name of property if required), City/town/suburb, State Postcode