Name		FORM # 280
Address	S	
City	State Zip Code	
Phone 1	Number	
	Address TIONER, PRO SE	
	MONTANA	JUDICIAL DISTRICT COURT COUNTY
In re	the Adoption of:	Department No.:
	(Initials of minor child)	Cause No.: <u>DA-</u>
	Petitioner.	CHILD'S CONSENT TO STEP- PARENT ADOPTION
older.		r Step-Parent Adoption. I am 12 years of age or the following information is true and correct:
1.	My full legal name is:	
2.	I live with my Mother / Father an	nd step-parent.
3.	I want my step-parent to adopt me. The	nis is my choice. No one has made me agree to this
	adoption. I am completely sure that I	want my step-parent to adopt me.
4.	I would	
	like to retain my current name.	
	like my new name to be	
	ince my new manne to be	<u> </u>

Signature:
Print Name:
)
: SS
 /
o Step-parent Adoption was acknowledged before me on (Child's Name)
(Child's Name)
Name (printed):
Name (printed): Notary Public for the State of Montana Residing at