



**RELEASE OF LIABILITY AND AGREEMENT TO HOLD HARMLESS**

In consideration of the services provided and to be provided to me or on my behalf by The Children's Home Society of NJ in connection with my efforts to obtain information about and/or contact with:

- (a) my biological child
- (b) my biological relatives; or
- (c) my child's biological relatives

I do hereby release The Children's Home Society of NJ, from any liability whatsoever now existing or arising in the future, in connection with its efforts on my behalf.

Further, I agree to hold The Children's Home Society of NJ harmless from any and all claims, which may be made as a result of the services and efforts, rendered by The Children's Home Society of NJ.

I intend this agreement to be binding upon my executors, administrators, heirs, devisees, assigns, and personal representatives.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Telephone Number

WITNESSED:

1. \_\_\_\_\_ 2. \_\_\_\_\_

SWORN TO, SUBSCRIBED AND ACKNOWLEDGE before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(SEAL)

\_\_\_\_\_  
Notary Public, State of \_\_\_\_\_

\_\_\_\_\_  
Typed or Printed Name of Notary

My Commission Expires: \_\_\_\_\_