SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE

☐ **HEMET** 880 N. State St., Hemet, CA 92543
☐ **INDIO** 46-200 Oasis St., Indio, CA 92201
☐ **RIVERSIDE** 4175 Main St., Riverside, CA 92501

RI-804.3

ATTORNEY OR PARTY WITHOUT ATTORNEY (*Name, State Bar Number and Address):*	*FOR COURT USE ONLY*
TELEPHONE NO.: FAX NO. (Optional): E-MAIL ADDRESS *(Optional):* ATTORNEY FOR *(Name)*:	
IN THE MATTER OF THE PETITION OF: ADOPTING PARENT(S):	CASE NUMBER:

CONSENT OF SPOUSE OF ADULT TO BE ADOPTED

I, _____ , the Wife/Husband of
(NAME ON BIRTH CERTIFICATE)

_____ a petitioner herein, do hereby fully and freely consent to

the adoption of my Husband/Wife by _____ .

IN WITNESS WHEREOF, the undersigned has executed this consent this _____ day of

_____ .

_____ (DATE)

_____ (SPOUSE OF ADULT TO BE ADOPTED)