



Adoption Jigsaw

A service of Jigsaw Search & Contact Inc

BIRTH RELATIVE AJ2 - Application for Search & Mediation Services

In order to assist you, you must obtain your documents from the relevant State Government Adoption Department confirming your relationship to the adopted person and giving their adoptive name. We encourage Perth birth mothers to attend our mothers discussion group on the first Tuesday of the month. You are welcome to contact us to discuss any matter.

Note: this application requires your signature. You can post, fax or scan and email it to us (see details below).

JIGSAW FEES*

\$200 combined fee

for membership and SINGLE PARTY search

Jigsaw is a not-for-profit organisation, funded partly by the State government of WA and partly through fees charged.

To reduce administration costs, we charge a combined fee for Associate Membership, search and mediation regardless of the amount of work involved.

Associate Membership entitles you to:

- Newsletter - *Jigsaw Pieces* published quarterly
- Use of Jigsaw library
- Registration on our National Contact Register
- Use of Jigsaw facilities for search
- Eligibility for full membership (by invitation) with voting rights

Annual Membership Renewal
\$50

** payment of fees can be negotiated, please talk to us if you have special difficulties.*

Membership Package - for single party search/mediation

This covers 12 months' Associate Membership, search, preparation interview, outreach and interview for the found party if appropriate, ongoing phone consultation and support for all parties. Fees **DO NOT** cover the purchase of certificates.

Purchase of certificates

In order to search we often have to purchase certificates such as marriage, death, birth. The cost varies according to the State and the length of search. A person being searched for may have married more than once in different states. Costs vary between \$40 and several hundred if multiple states are involved. We will invoice you the amount we pay.

Authorisation

I authorise Jigsaw to spend up to \$..... over and above the combined fee and will reimburse Jigsaw on invoice. I wish to be contacted before incurring any costs above this figure.

Signed _____ Date _____

Additional Services

Counselling/Additional Interviews \$60

2nd Party Search/Mediation - plus current membership \$100

It is not possible to advise you regularly about the progress of your search or mediation, however you are welcome to contact us for an update.

Payment Details - You can pay online via Paypal or Direct Deposit - remember to include your full name. Alternatively send your credit card details, cheque or money order together with this application to PO BOX 512 North Perth WA 6906. Make cheques payable to Jigsaw Search & Contact.

Visa/Mastercard : _____ / _____ / _____ / _____ Expiry _____ Amount _____

Name on Card _____ Signature _____

DIRECT DEPOSIT - BankWest Leederville BSB - 306 058 A/C - 0515379

DONATION: If you wish to make a tax deductible donation please add to the total amount.

Jigsaw Search & Contact

T: (08) 9328 4000 **E:** jigsaw@jigsaw.org.au

F: (08) 9328 4111 **W:** www.jigsaw.org.au

CURRENT DETAILS

Ms/Miss/Mrs/Mr/Dr/Mx

Male/Female/Non binary

Date of Birth _____

Surname _____ First name _____ Second Name _____

Address: _____ Postcode _____

State: _____ Country (if outside Australia) _____ Can we write to this address: **yes/no**

Ph: (H) _____ (Mob) _____

(W) _____ (Email) _____

Do you want to receive your newsletter (tick) : electronically to above email address
mail to above address **Can we leave a
message at
these phone
numbers
Yes/No**Any special instructions in regards to contacting you?

For whom are you searching? _____

BIRTH DETAILS - CHILD (Fill in **ONLY** details you know for sure, otherwise leave blank)**ORIGINAL NAME:**

Surname _____ First Name _____ Second Name _____

Date of Birth _____ Hospital _____ City _____ State _____

CURRENT NAME (if known)

Surname _____ First Name _____ Second Name _____

Adoptive Family

Mother—Surname _____ First name _____ Second _____

Father— Surname _____ First name _____ Second _____

BIRTH MOTHER - At time of birth of child:

Surname _____ First name _____ Second _____

Maiden name if different _____ Current Surname _____ Age when child born _____

Address at time of birth _____ State _____

Date of birth _____ Place of birth _____ Nationality _____ Marital Status _____

Occupation _____ Have you relinquished more than 1 child. **Yes/No**

Any other significant information _____

BIRTH FATHER - At time of birth of child:

Surname _____ First name _____ Second _____

Address _____ State _____

Date of birth _____ Age when child born _____ Place of birth _____

Nationality _____ Marital Status _____ Occupation _____

Does he know of the pregnancy/birth _____ Has he relinquished more than 1 child. **Yes/No/Not known**

Any other significant information _____

Adoption Documents:

Please attach **copies** of your documents, different states/countries will have different documents, attach whatever you have. Contact us if you are uncertain. Do you have:

Documents with the child’s adoptive name? **yes/no** Comment _____

Court (legal) documents? **yes/no** Comment _____

Information about the adoption? **yes/no** Comment _____

Searching

Have you conducted any search yourself. **yes/no**.

If yes please include copies of any certificates you have obtained and a summary of your search (add paper if necessary).

***Privacy Statement:** Jigsaw Search & Contact complies with the 2001 Privacy Act. All information collected is only used to assist in search and mediation with your birth family. Only staff and occasional special search volunteers can access this information.*

Agreement - Please read carefully

I (*print your full name*) _____ authorise Jigsaw Search & Contact to undertake search, contact and mediation services on my behalf. I authorise Jigsaw to receive on my behalf copies of all relevant certificates and/or information pertaining to myself and my relinquished child. I agree to Jigsaw sharing my information with volunteer researchers if deemed appropriate.

I consent to Isabel Andrews (Licensed Mediator) sharing or receiving information with or from the relevant Adoption Agency and or Government Department if deemed appropriate. Contact and Mediation involves sharing information with the found party. I take responsibility to specify what, if any, information is to be kept confidential from the found party. (this will be discussed in the interview with the mediator).

I agree at all times to abide by the Rules of Association of Jigsaw Search & Contact Inc., and to act strictly within the law of the relevant Adoption Act.

In the event of the person contacted NOT wishing to have any contact with me, I assume full responsibility for any actions taken by me after Jigsaw has advised me that *No Contact* has been requested by the person contacted.

Any comment _____

Signature _____ Date _____

Rules of this Association are available on our website and can be posted to you on request. Note: This completed form together with copies of documents pertaining to your membership become the property of Jigsaw Search & Contact Inc.