



**JOINT VERIFIED PETITION FOR
VALIDATION OF A
GENETIC SURROGACY AGREEMENT
G. L. c. 209C, § 28K**

Docket No. _____

**Massachusetts Trial Court
Probate and Family Court**

Name

and

Name

and

Name

If applicable:

Name

, **Petitioner/
Intended Parent**

, **Co-Petitioner/
Intended Parent**

, **Co-Petitioner/
Surrogate**

, **Co-Petitioner/
Spouse of Surrogate**

Division

INFORMATION ABOUT THE PETITIONER

1. Name of the Petitioner _____
First Name Middle Name Last Name
2. The Petitioner's current address:

(Address) (Apt, Unit, No. etc.) (City/Town) (State) (Zip)
Primary Phone #: _____ E-mail: _____
3. ☐ **The Petitioner signed a genetic surrogacy agreement and is an intended parent.**

INFORMATION ABOUT THE CO-PETITIONER

4. Name of the Co-Petitioner _____
First Name Middle Name Last Name
5. The Co-Petitioner's current address:

(Address) (Apt, Unit, No. etc.) (City/Town) (State) (Zip)
Primary Phone #: _____ E-mail: _____
6. ☐ **The Co-Petitioner signed a genetic surrogacy agreement and is an intended parent.**

INFORMATION ABOUT THE SURROGATE AND IF APPLICABLE, SURROGATE'S SPOUSE

7. Name of the Co-Petitioner/Surrogate _____
First Name Middle Name Last Name
8. The Co-Petitioner/Surrogate's current address:

(Address) (Apt, Unit, No. etc.) (City/Town) (State) (Zip)
Primary Phone #: _____ E-mail: _____
9. ☐ **The Co-Petitioner signed a genetic surrogacy agreement and is the surrogate.**

If applicable:

10. Name of the Co-Petitioner/Spouse of Surrogate

First Name

Middle Name

Last Name

11. The Co-Petitioner/Spouse of Surrogate's current address:

(Address) (Apt, Unit, No. etc.) (City/Town) (State) (Zip)

Primary Phone #: _____ E-mail: _____

12. ☐ The Co-Petitioner signed a genetic surrogacy agreement and is the surrogate's spouse.

FACTS RELEVANT TO VALIDATION

13. The Surrogate plans to give birth at: _____
(full address location)

14. ☐ The Petitioner and all Co-Petitioner(s) signed a genetic surrogacy agreement that meets all the requirements of G. L. c. 209C, §§ 28A, 28B, and 28C.

☐ A copy of the agreement and copy of the certifications of the attorneys representing the Petitioner and all Co-Petitioner(s) are attached to the petition.

15. The Petitioner and all Co-Petitioner(s) certify that:

☐ no assisted reproduction procedures related to this surrogacy agreement have commenced.

OR

☐ they have entered into a genetic surrogacy agreement, which was not validated by the Court before assisted reproduction procedures related to the surrogacy were commenced, but the agreement satisfies the requirements of (check all that apply):

☐ G. L. c. 209C, § 28A

☐ G. L. c. 209C, § 28B

☐ G. L. c. 209C, § 28C

16. By signing this verified petition, the Petitioner and all Co-Petitioner(s), each individually, certify under the penalties or perjury that:

☐ they are not less than 21 years of age;

☐ they completed the medical and mental health evaluations required by G. L. c. 209C, § 28A, and made these evaluations available to their co-petitioners;

☐ they reviewed the genetic surrogacy agreement with their independent legal counsel;

☐ at the time of reviewing the genetic surrogacy agreement, they were not under the influence of any medication, drugs, or alcohol that impaired their ability to understand the terms, and the consequences, of signing the genetic surrogacy agreement;

☐ at the time of reviewing the genetic surrogacy agreement, they were not affected by a mental health condition that impaired their ability to understand the terms, and the consequences, of signing the genetic surrogacy agreement;

☐ they received no promises from another petitioner, or any person acting on behalf of another petitioner, related to the contents of the genetic surrogacy agreement, beyond the terms of the agreement;

☐ they were not coerced or threatened to execute the genetic surrogacy agreement by anyone;

☐ they executed the genetic surrogacy agreement voluntarily and with a full understanding of its terms.

REQUESTS TO THE COURT

Wherefore the Petitioner and all Co-Petitioner(s) request that this Court issue order validating the genetic surrogacy agreement within 60 days of the commencement of this proceeding, pursuant to G. L. c. 209C, § 28K.

Date: _____

Date: _____

Signature of Petitioner/Intended Parent

Signature of Co-Petitioner/Intended Parent

(Print name)

(Print name)

Date: _____

Date: _____

Signature of Co-Petitioner/Surrogate

Signature of Co-Petitioner/Spouse of Surrogate

(Print name)

(Print name)

Information on Attorney(s) for Petitioner and Co-Petitioner(s), if any:

Signature of Attorney (Petitioner/Intended Parent)

Signature of Attorney (Co-Petitioner/Intended Parent)

(Print name)

(Print name)

(Address)

(Apt, Unit, No. etc.)

(Address)

(Apt, Unit, No. etc.)

(City/Town)

(State)

(Zip)

(City/Town)

(State)

(Zip)

Primary Phone #: _____

Primary Phone #: _____

B.B.O. # _____

B.B.O. # _____

E-mail: _____

E-mail: _____

Signature of Attorney (Co-Petitioner/Surrogate)

Signature of Attorney (Co-Petitioner/Spouse of Surrogate)

(Print name)

(Print name)

(Address)

(Apt, Unit, No. etc.)

(Address)

(Apt, Unit, No. etc.)

(City/Town)

(State)

(Zip)

(City/Town)

(State)

(Zip)

Primary Phone #: _____

Primary Phone #: _____

B.B.O. # _____

B.B.O. # _____

E-mail: _____

E-mail: _____