



CHILD REGISTRATION FORM

Complete the entire application to register child with:
The CAP Book, web site www.ChildrenAwaitingParents.org, and the
AdoptUSKids web site www.adoptUSkids.org.

Registration fee per year for all services:

- ♥ \$100 for a single child or sibling group of two (2) being registered together.
- ♥ \$200 for a sibling group of three (3) or more being registered together.

CAP is a national service. In keeping with the Adoption and Safe Families Act (1997), prospective parents from across the country can inquire on this child.

CAP Book Subscription fee per year:

- ♥ \$65 for CAP Book Subscription, updated bi-weekly.

Registrations Must Include:

♥ A clear photograph of the child. A good photograph is important. Original photographs are necessary for better quality. They can also be e-mailed to info@capbook.org. **We can work with school photographs or photographs can be taken free of charge at your nearest Sears Photo Studio.** Please contact CAP or the National Adoption Center to obtain a form. Also, include child's name and the date the photograph was taken on the back. **Please do not fold, paperclip or staple photograph.**

♥ A **thumbnail sketch** that best describes the child's personality, hobbies, special talents, likes and dislikes. **Be original!!** Please include health history and explain any medical terms that are used and how the conditions affect the child. Also include: educational status, current abilities and expected level of functioning as an adult, specific placement needs, and if the child has siblings with whom he/she will need to maintain contact. (See attached questions)

Is this child receiving a scholarship? (circle one) Yes or No

Is this child being updated from a previous year? (circle one) Yes or No

If **Yes**, fill in only child's name, new information, and sign the signature page on page 3. Also **provide a new thumbnail sketch and a new picture.**

If **No**, please complete the entire application.

Contact person: _____

Agency name: _____

Mailing address: _____

City: _____ State: _____ Zip code: _____

Contact person's phone: () _____ Agency phone: () _____

Agency fax: () _____ Contact's email: _____

To register with *Children Awaiting Parents*, **fully** complete the following:
If a registration is incomplete and/or there is no photo submitted for a child, the registration will be discarded after 3 weeks. Please type or print clearly.

Full name of child _____ DOB _____
(Only first name will be used in recruitment.)

Sex _____ Race _____ Legal status: _____ legally free _____ not legally free

EDUCATION:

What grade of school is the child attending? **Please circle one:**

U N P K 1 2 3 4 5 6 7 8 9 10 11 12

U Ungraded **N** Not in school **P** Pre-school program **K** Kindergarten

Is the child enrolled in special education? _____ Yes _____ No

If yes, please specify classification: _____

DISABILITIES:

Physical Disability (please specify):

Type _____ Type _____ Type _____
Check one: Check one: Check one:
_____ Mild _____ Moderate _____ Severe _____ Mild _____ Moderate _____ Severe _____ Mild _____ Moderate _____ Severe

Classification Definitions:

MILD: treatable medical conditions.

MODERATE: medical conditions that may not be completely treatable but will not inhibit all daily activities and functions.

SEVERE: multiple moderate conditions, or a condition that requires ongoing/constant medical attention.

Emotional/Behavioral Disabilities (please specify):

Type _____ Type _____ Type _____
Check one: Check one: Check one:
_____ Mild _____ Moderate _____ Severe _____ Mild _____ Moderate _____ Severe _____ Mild _____ Moderate _____ Severe

Is therapy required? _____ Yes _____ No

Mental Retardation:

Check one: _____ Mild _____ Moderate _____ Severe Please specify IQ, if known: _____

MILD: IQ range 50-75, MODERATE: IQ range 25-50, SEVERE: IQ less than 25

Learning Disability (please specify):

Type _____ Type _____ Type _____
Check one: Check one: Check one:
_____ Mild _____ Moderate _____ Severe _____ Mild _____ Moderate _____ Severe _____ Mild _____ Moderate _____ Severe

SIBLINGS (Please complete and attach a registration form for each sibling.)

Name(s) and birth date(s) of sibling(s) to be placed with child:

PERSONALITY

So that we may portray the child honestly and positively, please answer the following questions. Remember to BE ORIGINAL! (You may use an additional sheet of paper if necessary)

What adjectives do you think best describe the child?

What hobbies does the child participate in?

What does the child like/dislike?

What special talents does the child have?

What are the child's favorite foods? Least favorite foods?

Please explain the child's current educational status. If they are interested in higher education, please let us know what their interests include.

What is the child's favorite subject in school?

What are the child's hopes and dreams for the future?

Will the child do well in a home with other children or would they do better as an only child?

Does the child like animals? If so, what is their favorite? Do they want pets?

Does the child have siblings with whom they need to maintain contact? Are there other significant relationships that the child should maintain?

Will the child be able to function independently as an adult? If no, please explain.

What are the child's feelings about adoption? What kind of family is important to him/her?

In the space below, please provide any additional information that you feel is important or that you would like families to know about the child.

ADDITIONAL INFORMATION:

Check all of the following that are available (IT IS VERY IMPORTANT THAT THIS BE COMPLETED):

- General subsidy
- Medical subsidy
- Payment to cooperating agency for placement and supervision
- Travel assistance to adoptive family
- Videotape of child

If the child is already registered on the *AdoptUSKids* web site, please indicate the case number: _____.

Yes No Are there geographical restrictions for this child’s placement?

Yes No May the picture and description be used in adoptive parent newsletters, web sites, meetings, conferences, newspapers and on posters and fliers?

Agreement for Registering Children

Children Awaiting Parents, Inc. is offering recruitment services by featuring the registered child in *The CAP Book*, on *The CAP Book* web site and *AdoptUSKids* web site. In addition, extra recruitment will be provided for the child in the forms of recommending the child to be featured in The Heart Gallery, videos, parent group publications, meetings/conferences, various magazine and newspaper articles, on posters and fliers to be distributed nationally, on CAP’s *Friday’s Child* segment and through our *Faith in Children* initiative.

To receive all recruitment services mentioned above, please read the agreement and sign below:

Children Awaiting Parents, Inc. will:

- ♥ Promptly photo list the child in *The CAP Book* and on *The CAP Book* web site and *AdoptUSKids* web site.
- ♥ Provide extra recruitment for the child by recommending him/her to be featured in the Heart Gallery, videos, parent group newsletters, various websites, meetings/conferences, various magazine and newspaper articles, on posters and fliers to be distributed nationally, CAP’s *Friday’s Child* segment and through our *Faith in Children* initiative.
- ♥ Insure that authorized information about the child will be presented in an accurate and sensitive manner.
- ♥ Take all inquiries on the child and refer homestudied families and adoption agencies to the child’s agency contact.
- ♥ Keep the child’s agency contact apprised of recruitment efforts and responses.
- ♥ Maintain contact with the child’s agency contact to insure that accurate and updated information is available.
- ♥ Advocate for the child.

On behalf of the agency for which I work, I certify that it and I have legal authority to register the child listed and authorize the publication of him/her, and grant you authority to copy and disseminate the photograph provided. I hereby authorize and request that the child listed be registered and publicized as indicated above. I certify that the information provided about the child is accurate and complete. I understand that Children Awaiting Parents, Inc. is not a placing agency. The agency I represent retains complete authority and agrees to indemnify and hold harmless Gannett Co., Inc. and all other media owned by Gannett Co., Inc., including the Rochester Democrat & Chronicle, Inc., its agents, employees and independent contractors from any liability in connection with the registration and publicity of this child, consistent with this agreement. This also agrees to indemnify and hold harmless Children Awaiting Parents, Inc., its agents, employees and independent contractors from any liability in connection with the registration and publicity of this child, consistent with this agreement.

Child’s full name _____ Date _____

Custodial agency of child _____

Authorized signature _____ Title _____