

ADOPTION SERVICE FEE AGREEMENT

CLIENT: _____

DATE: _____

The client acknowledges that:

_____ An Adoption Specialist has satisfactorily explained the various adoption services available from CARITAS FAMILY SOLUTIONS and the associated ordinary costs of those services;

_____ The client has received, read and had the opportunity to ask questions about the "Client Rights and Responsibilities" and "Adoption Program Service and Fee Guide";

_____ The client understands that there may be extraordinary costs associated with any adoption which may include attorney fees, temporary baby care, court costs, and birth mother expenses allowed by law;

_____ The client is responsible for any medical costs incurred by the birth mother and the child not paid by Medicaid or any other medical provider or resource;

_____ Payment is due once services have been provided regardless of the ultimate outcome in the adoption process and even if CARITAS ultimately withholds its consent to the adoption. Fees for services are nonrefundable except as otherwise noted;

_____ All CARITAS fees and medical costs described above must be paid in full prior to the adoption finalization;

_____ The client is responsible for arranging any necessary financing. CARITAS does not act as a finance agency.

_____ The client agrees to pay a fee for the services provided under this Agreement at the rate and according to the due dates set forth in the Adoption Fee Schedule attached to this Agreement.

_____ The services highlighted by a checkmark on the attached Adoption Fee Schedule are those services that are anticipated to be provided based on the client's needs as of the date of this Agreement.

_____ If there is a need to change program services to facilitate the adoption process, CARITAS and the client will execute an updated Adoption Fee Schedule.

_____ Should services be provided by CARITAS that are not currently anticipated, the client will be responsible for any additional fees associated with the additional services, as long as the client has been appropriately apprised of the additional services and costs prior to the services being performed.

_____ CARITAS will bill the client for services provided, and the client is responsible for paying those services at the determined due date. CARITAS may discontinue services until payment has been received for the services billed. The client shall be liable for any collection and attorneys' fees CARITAS is forced to incur to collect overdue balances, whether or not litigation is commenced.

_____The client acknowledges that there are no refunds. CARITAS will return funds only when clients' have paid for services that have not been rendered.

_____The client also agrees and consents to providing financial information to CARITAS as required to complete a home study. This information may include, but is not limited to, copies of tax returns, financial statements and/or credit reports. The client further agrees and consents to executing the necessary documents in order to obtain the financial information.

_____The client acknowledges that this Agreement does not obligate CARITAS to provide adoption services if, in its judgment, it is no longer in the child's best interests to do so. CARITAS may also withhold its consent at any time during the adoption process, if CARITAS believes, in its judgment; it is no longer in the child's best interests for CARITAS to consent to the adoption. This Agreement also does not obligate the client to proceed with the adoption process, if the client decides not to do so.

_____The parties agree that the meaning and interpretation of all the provisions of this Agreement shall be controlled exclusively by Illinois law. Any dispute arising out of or any way related to this Agreement shall be controlled exclusively by Illinois law and the St. Clair County Circuit Court for the State of Illinois shall have jurisdiction to enforce the terms of this Agreement.

_____This Agreement, together with the attached Adoption Fee Schedule, the Client Rights & Responsibilities brochure and the Adoption Program Service and Fee Guide contain a full, complete and integrated statement of each and every term and provision agreed to by and among the parties and supersedes any prior writings or agreements between or among the parties.

IN WITNESS WHEREOF, the parties have signed this Agreement on the day and year first above written.

Client A

Client B

Type of Adoption

Estimated Cost

Witness

DOMESTIC FEE CHECKLIST

 \$300 Domestic Adoption Application Fee (Non-Refundable)

This fee is due upon receipt of the application.

 \$2000 Domestic Home Study Fee

This fee is for the home study narrative is a family assessment which ultimately recommends an adoption. The assessment process and narrative may take three to six months to complete.

 \$5000 Domestic Adoption Program Service Fee

\$7,000.00 will be billed once the ENRICH marital assessment or MMPI inventory have been completed. This is the home study and program fee combined. The family's "Dear Birthparent" letter will be added to the profile book and the website once the home study is complete and this fee is paid in full.

 \$8000 Domestic Adoption Placement Fee

\$8,000.00 will be billed to you once you receive a placement and will need to be paid in full before finalizing your adoption.

 \$1500 Home Study Fee for Additional Adoptions and Transfers

 \$500 Independent Home Study Update with Fingerprints

(For families not in the AFH program)

 \$6000 Birthparent Service Fee Only

 \$2000 Post Placement Services Only

 \$500 Interstate Compact Fee

 \$85 (Per Hour) Counseling

 Legal risk expenses are paid in full at time of billing

 Attorney Fees are paid directly by the family

INTERNATIONAL FEE CHECKLIST

_____ **\$300 Domestic Adoption Application Fee (Non-Refundable)**

This fee is due upon receipt of the application.

_____ **\$2500 International Home Study Fee**

This fee will be billed to you once you have completed the ENRICH marital assessment or MMPI inventory. Once it is paid in full, you and your placing agency will receive a signed and notarized copy of your home study narrative.

_____ **\$300 International Post Placement Fee**

This fee is due at the time of your home visit. Notarized reports will not be sent to your placing agency until the fee is paid. The number of visits is determined by the Placing Agency. Illinois requires at least one visit and report.

_____ **\$300 Yearly International Home Study Updates**

_____ **\$170 (Per Couple) Yearly Fingerprint Updates**

_____ **TOTAL INTERNATIONAL ADOPTION COST** _____ **WITH A YEARLY RECURRING COST OF** _____.

_____ **\$1500 Home Study Fee for Additional Adoptions**

_____ **\$1500 Home Study Fee for Transfers and Country Changes**

_____ **\$85 (Per Hour) Counseling**

_____ **Attorney Fees are paid directly by the family**