

RELEASE OF LIABILITY AND AGREEMENT TO HOLD HARMLESS

In consideration of the Confidential Intermediary Services to be provided pursuant to N.C.G. 48-9-104(b) to me by the _____ County Department of Social Services or _____, a licensed child placing agency, I do hereby release the _____ County Department of Social Services, or _____, a licensed child placing agency, from any liability whatsoever now existing or arising in the future, in connection with its efforts on my behalf.

Further, I agree to hold said agency harmless from any and all claims which may be made as a result of Confidential Intermediary Services and efforts rendered on my behalf.

I intend this agreement to be binding upon my executors, administrators, heirs, devisees, assigns, and personal representatives.

_____ Signature	_____ Address
_____ Printed Name	_____ Phone Number

I, _____, do hereby certify that _____ personally appeared before me this day and acknowledged execution of the foregoing Release of Liability and Agreement to Hold Harmless. I certify that I am a Notary Public or otherwise authorized to acknowledge signatures under Chapter 47 of the North Carolina General Statutes.

Witness my hand and seal this the ____ day of _____, _____.

(SEAL)

My commission expires: _____

Printed Name

Signature

Title