**BIRTH RELATIVE LETTERBOX AGREEMENT FORM**

CHILDREN’S SOCIAL WORKER: A separate form is to be completed with **each birth relative** by the second adoption review.

BIRTH FAMILY MEMBER: Please read the following carefully ensuring you understand your letterbox agreement terms and conditions. If there is any aspect that you would like to discuss further, please contact your social worker or contact the Letterbox Coordinator.

|  |  |
| --- | --- |
| CHILD’S BIRTH NAME | DATE OF BIRTH |
|  |  |

|  |  |  |
| --- | --- | --- |
| **Birth Relative’s Name:** |  | **Preferred**  **Contact**  **Method**  **(tick)** |
| **Relationship to Child:** |  |  |
| **Address:** |  |  |
| **Email Address:** |  |  |
| **Home/Mobile no:** |  |  |
| **Local Authority:** | **Coventry / Solihull / Warwickshire / Worcestershire / Herefordshire (please circle)** |  |
| **Social Worker:** |  |  |
| **Additional Info:** |  |  |

You will be provided with a ‘Information for Birth Relatives’ booklet which has guidance on what you can expect from letterbox, how to write your letters and also the postal and contact details for your Letterbox Coordinator.

Further support to write letters is available though the Letterbox Coordinator or through ACE’s Family Connexions team. Both can be contacted by telephoning: 0300 369 0556.

**AGREEMENT TERMS AND CONDITIONS**

This is an agreement between you and:

|  |  |
| --- | --- |
| Adopters and child/ren names |  |
| Month(s) adopters will send letters | (months of exchange) |
| You will receive | * Video clips * Voice Recording * Email * Letter * Child’s artwork * Cards * Photographs   🞎Other (please specify ) |
| You will be sending letters in: | (months of exchange) |
| You can send | * Video clips * Voice Recording * Email * Letter * Child’s artwork * Cards * Photographs   🞎Other (please specify ) |

**NB** The Letterbox Co-ordinator will automatically send you a reminder letter the month before the agreed month(s) of exchange.

If we do not receive communication from you during the exchange month the Letterbox Co-ordinator will send out a prompt letter at the end of the month. If a letter is still not received the Letterbox Co-ordinator will contact you to offer support.

The purpose of this agreement is to agree a regular exchange of information between both parties. It is important to remember that this is not a legally binding document, but this arrangement is a serious undertaking.

I understand that:

* My Letterbox exchange is for (news/cards/pictures etc) only. (news/cards/pictures etc) are not part of my agreement.
* The exchange of correspondence is between **myself and the child/ren’s adopters**. My letters will be addressed and directed to the adoptive parents and the child/ren. The adoptive parents will make the judgement on if/when/how they share information with the child/ren.
* All letters will be opened and read by the Letterbox Coordinator before being passed on and that copies of the letters will be kept on the child’s contact file available to the child when they turn 18.
* If the letterbox correspondence contain anything which is felt to be inappropriate the sender will be contacted by the Letterbox Coordinator with an offer of assistance to make any necessary changes.
* It is my responsibility to contact the Letterbox Coordinator if any of my/our personal information including contact details change and I/we understand that failure to do so may have an impact on receiving correspondence.

I agree that I will contact the Letterbox Coordinator:

* If I, or a close family member, are diagnosed as suffering from any serious medical condition which is genetically linked to notify the contact coordinator.
* If any children are born who will be the child’s full or half brother or sister to notify the contact coordinator.
* If a close family member, known to the child, dies.

I can be contacted by the contact coordinator at any time in the future:

* If the child/ren or the adoptive parents should ask for, or about, something in particular.
* If the child/ren should develop a serious illness which may be genetically linked.
* If the child/ren should die.

I give my permission:

* For the child/ren to view the copies of my letters on their letterbox file should they request to at the age of 18.

This agreement can be reviewed through ACE at any time to meet the needs of the child.

Signed: ………………………………………………………… (Birth Relative)

Print Name: …………………………….…………………… Date: ………………………………

Signed: ………………………………………………………… (Birth Relative)

Print Name: …………………………….…………………… Date: ………………………………