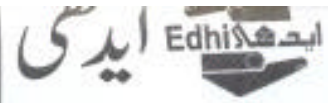


**EDHI**

BILQUIS EDHI CHILD ADOPTION CENTRE



TEL NOS. 2413232-2443158

FAX NO. 2418753

REF NO. _____

DATE _____

BILQUIS EDHI CHILD ADOPTION CENTRE**" ADOPTION FORM "**

NAME OF HUSBAND _____ NAME OF FATHER _____

NAME OF GRAND FATHER _____ RELIGION _____ CASTE _____

QUALIFICATION _____ OCCUPATION _____ MONTHLY INCOME _____

PLACE OF BIRTH _____ CITY/ VILLAGE _____

(NAME OF COUNTRY) _____

NATIONALITY _____ NATIONAL IDENTITY CARD NO. _____

(PHOTO COPY OF N. I. CARD)

NAME OF WIFE _____ NAME OF FATHER _____

NAME OF GRAND FATHER _____ OCCUPATION IF ANY MONTHLY INCOME _____

PLACE OF BIRTH _____ CITY/VILLAGE _____

NATIONALITY _____ NATIONAL IDENTITY CARD NO. _____

(PHOTO COPY OF N. I. CARD)

COMPLETE RESIDENTIAL ADDRESS _____

TELEPHONE NO. _____

OFFICE ADDRESS _____ TELEPHONE NO. _____

PERIOD OF MARRIAGE _____ PHOTO COPY OF MARRIAGE CERTIFICATE OR NIKA NAMA MUST BE ATTACHED WITH THIS FORM AND A POST CARD SIZE PHOTOGRAPH OF SPOUSE MUST BE ATTACHED.

AGE OF HUSBAND _____ AGE OF WIFE _____ HAVE YOU ANY CHILDREN YES NO

NUMBERS OF CHILDREN _____ HAVE YOU APPLIED FOR ADOPTION TO ANY OTHER INSTITUTION

IN PAKISTAN OR OTHER COUNTRY YES NO

NAME OF INSTITUTION _____

LISTS OF PROPERTIES/ IF ANY _____

**Mrs. Bilquis Edhi,
Edhi Child Adoption Centre,
Edhi Head Office, Karachi.**

I and my wife wants to adopt a MALE OR FEMALE Child or BOTH from your Adoption Centre of age.....and we are submitting in this Form all the information required by you for adoption of child in this "Form" as best to our knowledge are CORRECT and TRUE You have also right to enquire about this information by your means and you have right to REJECT or ACCEPT this Form.

Signature of Husband _____ Signature of Wife _____

Name _____ Name _____

Date _____ 200

NOTE : AFTER RECEIVING OF THIS FORM, WE WILL ENQUIRE ABOUT THE INFORMATION GIVEN BY YOU IN THIS "FORM" BY OUR MEANS AND AFTER ACCEPTANCE OF THE FORM, WE WILL INFORM BY TELEGRAM/TELEPHONE OR BY POST ON YOUR GIVEN ADDRESS OR TELEPHONE NUMBER.

Signature of Bilquis Edhi _____



BILQUIS EDHI

FOUNDER PRESIDENT

Director : Faisal Edhi, Qutab Edhi, Qubra Edhi, Almas Edhi, Zeenat Edhi, A. Sattar Edhi

PAKISTAN

- (1) ABDUL SATTAR EDHI FOUNDATION
- (2) BILQUIS EDHI FOUNDATION

Head Quarters

Rangila Street,
 Boulton Market, Mithadhar
 Karachi-74000 (Pakistan)
 Phone : 241-3232 / 242-1920-2424148
 Fax : 92-21-2418753

ABDUL SATTAR EDHI

International Foundation U.K.

69 Bell Street London NW1 6SX

Tel : 0171 723 7677

Fax : 0171 723 9799

Email : info@edhi.org Web site: <http://www.edhi.org>

U.S.A. AND U.K.

- (3) ABDUL SATTAR EDHI INTERNATIONAL FOUNDATION
- (4) EDHI INTERNATIONAL RELIEF FOUNDATION

Overseas Head Quarters

45-11, National Street, Corona

Queens N.Y. 11368, U.S.A.

Phone : 1 (718) 639-0633-639-5120

Fax : 1 (718) 639-0633 or 335-1978

Ref. No. _____

Date _____

We have adopted as our own child a Boy/Girl, We will abide by all the conditions as below:-

CONDITIONS

1. To give "AZAAN" in ears of child.
2. Vaccination will be give to child by parents.
3. Immediate medical check up must be carried out.
4. The child will be held in temporary custody (Amanat) for 3(three) months. perhaps there is any claim of his/her heir so that he/she could be returned.
5. Contact office after 3 three months to claim birth certificate.
6. Child should be brought after every 3 three months to visit.
7. Keep in touch on phone or letter every month.
8. After adoption, if a child is born there should be no extortion to the adopted child and he/she will be kept with adopting parents and will not be exchanged.
9. If there is any dispute between parents the child will be taken back by the organization, if organization deems fit he/she will be handed over to mother.
10. Keep in touch with organization for 5 years, bring the child to visit After that contact through correspondence.

Note: Provide a photograph of child.

Signature husband

Name

Address

Signature wife

Name

Address