



NC Adoptive Parents
celebrating the adoption triad
www.nchopefulparents.org

Hopeful Parents Membership Form

****Please Print All Information Clearly**** Date: _____

Name(s): _____

Address: _____

Phone #: _____ Email: _____

(Email will be used for information contact only, i.e. meeting and event reminders)

May we share the above information with our members?

YES _____ NO _____ YES with restrictions _____

How did you learn about Hopeful Parents? _____

Adoption Status: _____ Just Starting _____ In the Process _____ Already Adopted

Interested in _____ Domestic _____ International – Country _____

Would you like to be contacted by a Hopeful Parents member with similar interests? ___ YES ___ NO

- Your time and talent is always appreciated, please indicate any areas you would be willing to volunteer:

Baby showers _____ Birthmother gift/education bags _____ Parent Partnership Program _____

Fundraising _____ Desktop Publishing _____ Speaking _____ Leadership _____

- What skill or hobby do you have to share? _____

Thank you for joining Hopeful Parents
Please submit this sheet to any board member or mail to:
Hopeful Parents
2 Hanover Square
P.O. Box 1896
Raleigh, NC 27602