

Parental Consent

I, _____, am the parent/guardian of
(print name of parent/guardian*)

_____, and I know of her intent to have an
(print name of minor)

abortion and I consent to such an abortion being performed.

(signature of parent/guardian*)

Date: _____

Certificate of Acknowledgement

City/County of _____ Commonwealth of Virginia

The foregoing instrument was acknowledged before me this _____ day of
_____, 20_____.

By: _____
(name of the parent/guardian*)

Notary Public

My commission expires: _____

*"Guardian" means (i) a parent or duly appointed legal guardian or custodian of the minor or (ii) a person standing in loco parentis, including, but not limited to, a grandparent or adult sibling with whom the minor regularly and customarily resides and who has care and control of the minor.