

# APPLICATION FOR A BIRTH CERTIFICATE

**PLEASE READ THE NOTES OVERLEAF** before completing this form

FOR REGISTER OFFICE USE ONLY		
Register No.	Entry No.	Certificate No.
Date of issue		

**IF THE PERSON IS ADOPTED PLEASE SEE OVERLEAF**

## TO THE REGISTRATION OFFICER HAVING CUSTODY OF THE REGISTER

### 1 TO BE COMPLETED BY THE PERSON APPLYING FOR THE CERTIFICATE

Your full name                      Mr  
    Mrs .....  
    Miss/Ms ..... (STATE NAME IN FULL)

Your postal address .....

..... Post Code: ..... Telephone no: .....

**2** It would help us if you would state the purpose for which the certificate is required .....

.....

**3** Are you applying for your own birth certificate?    Yes/No  
 If not please state your relationship to the person .....

### 4 DETAILS OF BIRTH CERTIFICATE REQUIRED

**FULL NAME AT BIRTH**  
 FORENAME(S)

SURNAME

DATE OF BIRTH	Day	Month	Year
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PLACE OF BIRTH (full address or name of hospital)

**FATHER'S FULL NAME**  
 FORENAME(S)

SURNAME

**MOTHER'S FULL NAME**  
 FORENAME(S)

SURNAME

MAIDEN SURNAME

### 5 REQUIREMENTS (for information about the types of certificate available see overleaf)

**A. STANDARD BIRTH CERTIFICATE    £ .....**

I require ..... standard birth certificate(s)  
 NUMBER

**B. SHORT BIRTH CERTIFICATE        £ .....**

I require ..... short birth certificate(s)  
 NUMBER

**C. BIRTH CERTIFICATE  
 for certain statutory purposes    £ .....**

I require a birth certificate for each undermentioned purpose against which I have placed a tick (✓)

CHILD BENEFIT ACT	
SOCIAL SECURITY (ADMINISTRATION) ACT	
EDUCATION ACT	
FACTORIES ACT	
GOVERNMENT ANNUITIES	
WAR OR NATIONAL SAVINGS CERTIFICATES	
NATIONAL SAVINGS BANK	
PREMIUM SAVINGS BONDS	
SAVINGS CONTRACTS	
INDUSTRIAL INJURIES (OLD CASES) ACT	

**6** Signature ..... Date .....

**7** (POSTAL APPLICATIONS ONLY) I enclose a cheque/postal order for £ ..... made payable to ..... and crossed "/& Co/" together with a stamped addressed envelope