

# Application for a birth certificate

1 To be completed by the person applying for the certificate

Your full name:

Mr / Mrs / Miss / Ms \*

.....  
(\*delete as applicable)

Your postal address

.....  
.....

Post Code.....

Telephone no.....

2 Purpose for which certificate is required

.....  
.....

3 Are you applying for your own birth certificate? Yes/No

If not please state your relationship to the person on the certificate

.....  
.....

4 Details of the Birth Certificate:

FULL NAMES AT BIRTH (include all forenames and surname at birth)

.....

DATE OF BIRTH

.....

PLACE OF BIRTH (Full address or name of maternity home)

.....

.....

FATHER'S/PARENT'S\*\* FULL NAME

.....

MOTHER'S FULL NAME

.....

MOTHER'S MAIDEN SURNAME

.....

5 Service required:

State number of certificates

Full certificate ..... (£11) Express certificate ..... (£35)

6 Signature of applicant:

.....

Date

.....

**7 Cheques and postal orders should be made payable to South Gloucestershire Council and posted with this signed, completed form to South Gloucestershire Register Office, CE&CR Department, PO Box 1953, Bristol BS37 0DB. Please enclose a stamped addressed envelope.**

\*\*Parent means the mother's female partner who under the Human Fertilisation and Embryology Act 2008 is to be treated as the parent of the child