



Application for a Manitoba Birth Document

Please PRINT clearly to complete the front and back of this application.
 Incomplete applications or those with insufficient payment will be returned.

DISPONIBLE EN FRANÇAIS

Section 1 - Applicant's address

Name		Daytime phone number(s)	
_____		(____) _____ - _____	
Address		_____	
_____		(____) _____ - _____	
City	Province	Postal Code	Email address
_____	_____	_____	_____
Delivery address (if different than above)			
Name		Company name (if applicable)	
_____		_____	
Street No.	Street Name	Apt. no.	Buzzer No.
_____	_____	_____	_____
Postal Code	City	Province	Country
_____	_____	_____	_____
Fees and service levels subject to change without notice, please check our website for current information.			Phone number
_____			_____

Section 2 - Type of document requested

	Quantity		Quantity
<input type="checkbox"/> Birth Certificate with parents' names	_____	Birth certificate with parents' names that does not display sex	_____
<input type="checkbox"/> Birth Certificate without parents' names	_____	Birth certificate without parents' names that does not display sex	_____
<input type="checkbox"/> Copy of registration (this is not a birth certificate)	_____		
Reason for application : _____			
DOCUMENT ISSUED IN: English OR French			

Section 3 - Manitoba birth information

Provide the name at birth or adoptive name unless there has been a legal name change

Last name on birth record			First name	Middle name(s)
_____			_____	_____
Date of birth				
_____	_____	_____		
Month	Day	Year		
Place of birth in Manitoba (town/city)				

M A N I T O B A				
Parent 1 (Provide the last name at their birth or adoptive name unless there has been a legal name change)				
Last name		First name	Middle name(s)	
_____		_____	_____	
Place of birth (province if born in Canada—country if born outside of Canada)				

Parent 2 (Provide the last name at their birth or adoptive name unless there has been a legal name change)				
Last name		First name	Middle name(s)	
_____		_____	_____	
Place of birth (province if born in Canada—country if born outside of Canada)				



Section 4 - Applicant's relationship to person named on certificate:

Check one box that applies to you and sign below:

Self, if the application is for your own certificate

Parent, either parent named on the record of the child

Legal guardian (submit a complete copy of guardianship papers)

Representative with written authorization from person entitled, parent, or guardian

Spouse, child, parent or sibling of the deceased if application is for a birth certificate for a deceased (Attach documentation showing familial relationship)

Familial relationship to deceased : _____

Date & place of death (proof of death required) : _____

Signature of eligible person : _____

Print name of eligible person: _____

Section 5 - Type of issuance service

REGULAR ISSUANCE SERVICE

Processing time may vary. Current processing times are posted on our website. Service is not available until documents for a vital event have been filed in full, and registration has been completed without errors. Although a payment may be processed immediately, regular issuance service will proceed after a vital event is registered correctly and in full.

- Delivered by Canada Post
- Fee: **\$30** per document

RUSH ISSUANCE SERVICE (Signature required upon delivery)

Processed within 3 business days (shipping time is not included). Selecting rush issuance service expedites processing of an application for a document. It does not expedite registration of a vital event. Rush issuance service is not available until documents for a vital event have been filed in full, and registration has been completed without errors. Although a payment may be processed immediately, rush issuance service will proceed after a vital event is registered correctly and in full.

- Delivered by courier
- Fee: Canadian destination **\$65**
- US destination **\$75**
- International destination **\$105**

} Includes ones document. Cheques for rush service must be certified

Section 6 - Method of payment

Cash } In person only

Debit card }

MasterCard / Visa

Money Order } Payable to the Minister of Finance

Certified Cheque }

I authorize the Vital Statistics Branch to charge to my card: \$ _____

Credit Card number Expiry date

Cardholder's name Cardholder's signature

PROTECT YOUR CREDIT CARD INFORMATION DO NOT SUBMIT BY EMAIL

- No post dated cheques will be accepted

- A \$20 service fee will be charged on returned cheques

A \$30 ADMINISTRATION FEE WILL BE RETAINED WHEN CUSTOMERS DO NOT RESPOND TO REQUESTS FOR MORE INFORMATION. PLEASE NOTE THAT NO REFUNDS WILL BE PROVIDED ONCE VSB RECEIVES YOUR APPLICATION, REGARDLESS OF THE APPLICATION RESULTS

Inquiries

Telephone: 204-945-3262

Toll-Free (within Canada) 1-866-949-9296

Fax: 204-948-3128

E-Mail: vitalstats@gov.mb.ca

Web-Site: http://vitalstats.gov.mb.ca

Address: Vital Statistics Branch
254 Portage Ave Wpg MB R3C 0B6

The Vital Statistics Branch is collecting your personal information pursuant to The Vital Statistics Act, CCSM c V60, in order to process and respond to your application. This collection is authorized under clauses 36(1)(a) and (b) of The Freedom of Information and Protection of Privacy Act, CCSM c F175 ("FIPPA"). Your personal information is protected under FIPPA's privacy provisions, and will not be used or disclosed for any other purposes, except as authorized by law.

If you have any questions about this collection, please contact the Access & Privacy Coordinator for the Department of Consumer Protection and Government Services at 204-792-8214 or FIN-CSC-EC_FIPPA@gov.mb.ca

PROTECT YOUR PRIVATE AND CONFIDENTIAL INFORMATION DO NOT SUBMIT BY EMAIL

Available in other formats upon request.