



This is a permanent legal record.
Type or print plainly in blue or black ink and complete all items.
Please read all instructions before completing this form.

Office use only

SECTION A - CHILD'S INFORMATION (see instruction #2)

Surname (Last Name)		Sex of Child
First Name	Middle Name(s)	
Birth Date	Year Month Day	Name of hospital (if not hospital give exact location where birth occurred)
Place of Birth (City, town, village, township - by name)		(Regional municipality, county or district)

SECTION B - MOTHER'S INFORMATION
(see instruction #3)

SECTION C - FATHER'S/OTHER PARENT'S INFORMATION
(see instruction #4)

Current Legal Surname (Last Name)		Current Legal Surname (Last Name)	
Legal Surname at Birth (Maiden Name)(see instruction #3b)		First and Middle Names	
First and Middle Names		Legal Surname at Birth (see instruction #4d)	
Any Other Legal Surnames		Any Other Legal Surnames	
Birthplace (City/town/village)		Birthplace (City/town/village)	
Birthplace (Province/country)	Birth Date Year Month Day	Age	Birthplace (Province/country)
Mother's Occupation		Marital Status of Mother <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Common Law <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	

SECTION D - BIRTH INFORMATION

Mother's Residence - Complete street address (City, town, village, township - If rural give Post Office or Rural Route address)		Postal Code
Mother's Mailing Address if different from above - Complete street address (If rural give Post Office or Rural Route address)		Postal Code
Duration of pregnancy (in weeks)	Total number of children ever born to this mother including this birth	Weight of child at birth Grams _____ or ____lb. ____oz.
	Of this Total , Number born live	
	Of this Total , Number stillborn	
Name of Attendant at birth		Kind of Birth <input type="checkbox"/> Single <input type="checkbox"/> Twin <input type="checkbox"/> Triplet <input type="checkbox"/> Other
		If multiple birth, state whether this child was born 1 st , 2 nd , 3 rd , etc.
		<input type="checkbox"/> Physician <input type="checkbox"/> Midwife <input type="checkbox"/> Other, specify: _____

SECTION E - BEFORE SIGNING PLEASE READ INSTRUCTIONS Certification of Informant (see instruction #2)

Before completing this section (see instruction 2c). If you are choosing a surname that is not one of the parent's surnames or combination of those names, but is in accordance with the child's cultural, ethnic, or religious heritage, check one of the following boxes.

Cultural Heritage Religious Heritage Ethnic Heritage

I (We) certify the statements made on this form are true and correct. I am (We are) aware that it is an offence to wilfully make a false statement on this form. I (We) have agreed that the child's surname will be as shown in section A. <input type="checkbox"/> Yes <input type="checkbox"/> No	Signature of Mother X	Year Month Day
	Signature of Father/Other Parent X	Year Month Day
	Signature of Informant (see instruction 2f) X	Year Month Day

SECTION F - DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY - Certification of Division Registrar

I am satisfied as to the correctness and sufficiency of these statements on this form and register the birth by signing this statement.		Registration Number
Signature of Division Registrar X		
Division Registrar	Code Number	Year Month Day
For office use only		

Statement of Live Birth - IMPORTANT Instructions

General Instructions:

INSTRUCTION #1

- a) This document is a permanent legal record. The child's information will be registered as it appears on this form. Failure to complete this document accurately will result in delays in registration.
- b) It is an offence to intentionally lie on this statement. An individual who wilfully makes a false statement on the form, may on conviction be liable to a maximum fine of \$50,000 or imprisonment for a maximum term of 2 years less a day.
- c) If you make a mistake when filling out this form, bracket and initial the error and enter the correct information. Use of correction fluid will **not** be accepted. Any changes on the form must be initialed by each parent that signs the form.
- d) The birth of every child born in the Province of Ontario must be registered within 30 days of the date of birth with the municipal clerk of the municipality in which the child was born. The municipality may charge a fee for handling this form. This fee is not for a birth certificate. An additional fee will be charged to obtain a birth certificate.

Child's Name:

INSTRUCTION # 2

- a) First and middle names and surnames are not to be underlined or enclosed in brackets or quotation marks. Brackets are only used to correct an error as required in the general instructions (above). Anything in brackets will be ignored.
- b) The order in which the first and middle names are entered on this form is the order in which they will appear on an official birth certificate, following the surname.
- c) If both parents' information is included on this form, the child's surname may be either parent's surname or former surname, or both parents' surnames or both parents' former surnames hyphenated or combined. If only the mother's information is included on the form, the child's surname may be the mother's surname or former surname. The parent or parents who sign the form may also give the child a surname based on the child's ethnic, religious or cultural heritage. If this option is chosen, the parent(s) must check the appropriate box in section E.
- d) If the parents disagree on the child's surname, the registered surname will be the parents' surname if they have the same surname. If the parents have different surnames, the child's surname will be registered using both parents' surnames hyphenated in alphabetical order.
- e) Each parent listed on the form must sign the form unless that parent is incapable of completing the birth registration form because of illness or death. If one or both parents do not sign this form because they are incapable, a statutory declaration must be submitted with this form. This statutory declaration is available from the municipal clerk of the municipality in which the child was born or from the Office of the Registrar General.
- f) Where neither parent signs this form because both parents are incapable, an informant acting on the mother's behalf must complete and sign the form. In this situation, the child's surname must be 1) the parents' surname, if they have the same surname; 2) a surname consisting of both parents' surnames hyphenated in alphabetical order, if they have different surnames; or 3) if only one parent is known, that parent's surname.

Mother's Information:

INSTRUCTION # 3

- a) The mother on the form must be the woman who gave birth to the child.
- b) The mother's legal surname at birth (maiden name) is the mother's legal last name at the time of her own birth, unless the mother was adopted. If the mother was adopted, enter her adoptive name if that is different than her surname at birth.
- c) Different rules about who can be named on a birth registration apply if a person has been declared to be the parent of the child by a court order issued under the *Children's Law Reform Act* or an adoption order.

Father's/Other Parent's Information:

INSTRUCTION # 4

- a) A "Father", for the purposes of this form, must be the biological father of the child and consent to be acknowledged as the father.
- b) An "Other Parent", for the purposes of this form, must be another person who consents to be acknowledged as the parent, if the biological father is unknown and the child was born of assisted conception with an anonymous sperm donor.
- c) The father's/other parent's information may be included on the form, if the mother acknowledges that person as a parent of the child.
- d) The father's/other parent's legal surname at birth is the person's legal last name at the time of his/her birth, unless adopted. If adopted, enter the father's/other parent's adoptive name if that is different than the surname at birth.
- e) If a father's/other parent's information is on the form, that parent must also sign this form unless they are incapable of completing the birth registration form because of illness or death.
- f) Different rules about who can be named on a birth registration apply if a person has been declared to be the parent of the child by a court order issued under the *Children's Law Reform Act* or an adoption order.

Personal information contained on this form is collected under the authority of the *Vital Statistics Act*, R.S.O. 1990, c.V.4 and will be used to register and record births, stillbirths, deaths, marriages, additions or changes of name, corrections or amendments, provide certified copies, extracts, certificates, search notices, photocopies, and for statistical, research, medical, law enforcement, adoption and adoption disclosure purposes. It is an offence to wilfully make a false statement on this form. Questions about this collection should be directed to: The Deputy Registrar General, Office of the Registrar General, P.O. Box 4600, Thunder Bay ON P7B 6L8. Telephone 1-800-461-2156 or 416-325-8305.