



Antigua and Barbuda
Civil Registry

Application for a Birth Certificate

Details of Birth Certificate Requested

Name :.....
Sex: Female.....Male.....
Date of Birth:.....
Mother’s Name:.....
Father’s Name:.....
Father’s Occupation:.....
Parish:.....
.....

Details of Person applying for Birth Certificate

Name of Person applying for Birth Certificate:.....
Relationship of Applicant to Person named in the Certificate:.....
Address of Applicant:.....
Telephone No:.....
E mail Address:.....
Date of Application:.....
Photo ID:.....
Signature of Applicant:.....
Received by:.....
.....

Official Use:

Date of Application:.....
Date of Completion:.....
Name and Signature of Clerk:.....