



**THE BIRTHS AND DEATHS REGISTRATION ACT**  
**RE-REGISTRATION APPLICATION FORM**

CHILD'S BIRTH DETAILS			
First Name of Child	Middle Name(s)	Surname	
Date of Birth (dd/mm/yyyy)	Sex of Child:	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Place of Birth (Hospital Name or Home Address)	(Parish of Birth)	(District of Birth)	
Birth Entry Number	Date of Registration (dd/mm/yyyy)		
First Name of Mother	Middle Name(s)	Surname	(Maiden Name)
First Name of Father	Middle Name(s)	Surname	
PARENTS MARRIAGE DETAILS			
Bride's Full Name (including Maiden Name):	Groom's Full Name:		
Place of Marriage:	Parish of Marriage:		
Marriage Officer's Name:	Date of Marriage (dd/mm/yyyy):		
APPLICANT'S INFORMATION			
Applicant's Full Name:	Applicant's TRN:		
Street Address:	Town/City, Zip Code, Country:		
Applicant's Relationship to child:	Telephone number: _____ (cell) _____ (home) _____ (work)		
Reason for applying (please tick): _____ Driver's licence _____ Passport _____ Visa _____ Other	Email Address:		
Signature of Applicant:	Date of Application:		

If additional children are to be Re-Registered, Tick this BOX  and complete the "List of All Children Born to Mother" Form (See overleaf).



GOVERNMENT OF JAMAICA  
REGISTRAR GENERAL'S DEPARTMENT  
**LIST OF ALL CHILDREN BORN TO MOTHER**

(To be completed and attached to Application for Registration of Birth, Declaration of Late Entry of Naming, or other forms, as necessary).

Please PRINT All Information in BLOCK CAPITAL LETTERS. The more information provided, the better the chances for prompt, accurate service.

Mother's Names \_\_\_\_\_  
Christian (First) Middle Surname

CHILD'S NAMES			DATE OF BIRTH Day/Month/Year	SEX M or F	PLACE OF BIRTH (Hospital Name or Street or District)	REGISTRATION DISTRICT AND NUMBER	REMARKS
Christian (First)	Middle	Surname					



Statutory Declaration for Re-Registration

I ..... do solemnly and sincerely declare that:

1. The tracking number (s) for the birth registration form are :

Tracking Number: [ ]

2. That my date of birth is.....and I am .....years old.

3. That I currently reside at.....  
.....  
.....

4. That my present occupation is.....

5. That my contact information is:

i. Cell number.....and.....

ii. Email address..... and.....

6. That my tax registration numbers (TRN) is ..... A certified copy marked .....is attached.

7. That both parents' birth certificates bear entry .....and.....respectively. Certified copies marked .....and .....are attached.

8. That both parents got married on the .....day of .....in the year .....at.....in the parish of .....by.....(Name of Marriage Officer). A certified copy marked .....is attached.

9. That I hereby apply to do the re-registration for.....(number of children) whose name (s) are:

.....  
.....  
.....  
.....

.....A certified copy marked .....and.....are attached.

10. That there was **no legal impediment**<sup>1</sup> to the marriage at the time of the birth of the child/ren named in paragraph 9.

11. That at the time of my child's birth, I was living at ..... and my occupation at the time of birth time was.....

**AND I make this solemn declaration conscientiously believing the same to be true under and by virtue of the Voluntary Declarations Act.**

TAKEN AND ACKNOWLEDGED )  
By the said ..... )  
At ) Declarant's Signature  
In the parish of )  
This day of 20 )  
In the presence of )  
)  
.....)

**JUSTICE OF THE PEACE /NOTARY PUBLIC**

**MARKSMAN CLAUSE**

**(This Section to be used only when Declarant is unable to sign due to illness or illiteracy)**

**AND I/WE** make this solemn declaration conscientiously believing the same to be true under and by virtue of the Voluntary Declarations Act.

If the individual is unable to read or write by reason of illiteracy or illness.

**Signed by**

\_\_\_\_\_  
**Name of Declarant**

\_\_\_\_\_  
**Signature/Mark**

After the same was read over and explained to him or her and who expressed themselves as understanding the nature and effects of the contents.

In the presence of:

\_\_\_\_\_  
**Name of Justice of Peace/Notary Public**

\_\_\_\_\_  
**JP/Notary Public Signature & Seal**

\_\_\_\_\_  
**Parish /State/Province**

\_\_\_\_\_  
**Date**

<sup>1</sup> **Example of a legal impediment:** either of the parents was under the age of 16 years or either of the parents was married at the time of the child's birth.



Statutory Declaration for Re-Registration

I ....., do solemnly and sincerely declare that:

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Tracking Number: [ ]

2. That my date of birth is.....and I am .....years old.

3. That I currently reside at.....  
.....  
.....

4. That my present occupation is.....

5. That my contact information is:

i. Cell number.....and.....

ii. Email address..... and.....

6. That my tax registration numbers (TRN) is ..... A certified copy marked .....is attached.

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.....  
.....  
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.....A certified copy marked .....and.....are attached.

