

Saskatchewan Birth Certificate Application

If you are applying for a child and you are *not a parent* listed on the birth registration or a *legal guardian with guardianship papers* you must contact eHealth Saskatchewan directly at 1-855-eHS-LINK (347-5465)

If Adopted: Please provide the adoptive parents' names and the current legal name of the adoptee.

Step 1 - Contact Information - Person applying for certificate

Name: _____ Firm/Organization: _____
Applicant - Full Name *Complete only if certificate(s) to be delivered here.*

Home Number: (_____) _____ Daytime Number: (_____) _____ Extension: _____ Work _____ Cell _____

Residential Address: _____ Apt.: _____ Buzzer Code: _____ City: _____

Prov./State: _____ Country: _____ Postal/Zip Code: _____ Email: _____

Step 2 - Birth Details of Subject - Person named on certificate

You **MUST** enter as much information as possible. Missing or incorrect information may delay your application.

Reason Certificate Required: _____ Birth Registration Number: _____
Specify reason - Example: lost, personal records, passport, etc.

Subject Name: _____
First Name Middle Name Last Name Current Last Name
**Use the subject's last name at birth or adoptive name unless there has been a legal name change.*

Gender: Male Female Number of older siblings at Birth - 1st born, 2nd born, etc.: _____

Date of Birth: _____ Place of Birth: _____, Saskatchewan
Month Day Year City/Town/Village/Other

Father's Name: _____
** Middle - must provide if known * Last - at birth or adopted name Current Last Name*

Father's Date of Birth: _____
Month Day Year

Father's Place of Birth: _____
City/Town Province/State Country

Mother's Name: _____
** Middle - must provide if known * Last - maiden or adopted name Current Last Name*

Mother's Date of Birth: _____
Month Day Year

Mother's Place of Birth: _____
City/Town Province/State Country

Other Parent's Name: _____
*First * Middle - must provide if known * Last - maiden or adopted name Current Last Name*

Other Parent's Date of Birth: _____
Month Day Year

Other Parent's Place of Birth: _____
City/Town Province/State Country

Other Parent's Name: _____
*First * Middle - must provide if known * Last - maiden or adopted name Current Last Name*

Other Parent's Date of Birth: _____
Month Day Year

Other Parent's Place of Birth: _____
City/Town Province/State Country

Newborns: Birth registration must be complete (about 4 - 6 weeks) before certificate applications will be processed. Certificate applications will be held until registration is complete.

Step 3 - Payment Information - Select certificate type and payment method- SK Birth Application

Vital Certificates process and delivery times are approximately 15 - 25 business days for all certificates. Delivery times are average times and cannot be guaranteed. All taxes and shipping are included.

- _____ (Quantity) - Individual Information Birth Certificate - \$85.00 each
- _____ (Quantity) - Family Information Birth Certificate (Long Form) - \$90.00 each
- _____ (Quantity) - Certified Copy of Birth Registration - \$105.00 each
- _____ (Quantity) - Genealogical Photocopy of a Registration of Birth- \$105.00 each

Individual Birth Certificate: Contains individual's name, date of birth, place of birth, sex, registration number and registration date. Not recommended for children under 16 years old.

Family Birth Certificate: Contains individual's name, date of birth, place of birth, sex, parent(s) name(s), their birthplace(s) and registration number and registration date. Recommended for under 16 years.

Certified Copy of Registration: Photocopy of the actual birth registration as filled in by the parents. It is certified as a true copy of the original. Not for use as identification.

Genealogical Photocopy: Contains all the information that appears on the original registration and is stamped "For Genealogy Only".

This certificate is only available for events that took place over 100 years ago.

Credit Card Type:



Credit Card Number: _____ Expiry Date: _____

Name of Cardholder: _____ Cardholder Email: _____

Signature: _____ Date: _____

Charge will appear as 'Vital Certificate Processing Services' on credit card statement. Cheques and money orders must be made payable to 'Vital Certificates'.

Step 4 - Application Checklist

To receive your certificate you must submit all required information and documentation. If any of the checklist requirements (listed below) are not met, your application will be placed on hold and there will be delays in processing times. *Please call us toll-free at 1.866.828.9680 if you have any concerns.*

Eligibility - I am one of the following:

I am the person who is the subject of the certificate. **I am 15 years old or older.**

I am the parent of the person who is the subject of the certificate. **That person is less than 18 years old.**

I am the custodial guardian - *Please provide a copy of the custodial papers.*

I am the executor of the estate of the subject. **The subject is deceased.**

-Please provide a copy of the death certificate and last will and testament naming you as the executor.

-Only eligible to order the 'Certified Copy of the Original'

Application

I have completed the application to the best of my ability.

Authorization (page 3)

I have completed, dated, and signed the Authorization Letter.

Identification - I have enclosed the required photocopies of clear and valid I.D.:

Two pieces of government issued identification - *one piece must contain your photo, both pieces must contain your signature; OR*

Two pieces of government issued identification - *one piece must contain your signature; OR*

One piece of government issued identification (*containing your signature*) AND your notice of assessment or utility bill.

Payment - I have provided information for one of the following payment options:

I have provided my credit card information with a date and signature - *charge will appear as 'Vital Certificate Processing Services'*

I have enclosed a money order or a certified cheque payable to Vital Certificates.

I have enclosed a personal cheque payable to Vital Certificates - *application will be held until the cheque clears in 7 to 10 business days.*

Submit - I am submitting my application by one of the following methods:

Toll-Free Fax: 1.866.265.6300

Scan & Email: saskatchewan@vitalcertificates.ca

Regular Mail: Vital Certificates, 79-622 Front Street, Nelson, BC V1L 4B7

NOTE: Although you can fill out the application online, you **cannot** save or email it.

Please **type, print and sign** the application, then fax, scan and email, or mail your application to us.

Vital Certificates (VC) assists in verifying that applications are accurate to avoid delays in processing. VC is not operated, licensed, or affiliated with any government agency.



I, _____, am the eligible person.
First Middle Last

My relationship to the person named on the certificate is _____ and my address is as follows:
(Self, mother, father, etc.)

Street Address: _____

City: _____

Province: _____

Postal Code: _____

Phone Number: _____

The authorized individual, an agent to the eligible person, is Mady Carmichael at Vital Certificate Processing Services, 79 – 622 Front Street, Nelson, British Columbia, V1L 4B7 (1-866-828-9680).

I am requesting a _____.
Birth/Death/Marriage Certificate/Certified Copy

I hereby waive, for the purpose of such certificate, any privilege I may have regarding secrecy of information and release and discharge eHealth Saskatchewan to whom this release may be directed of all claims for any damages I may sustain resulting from any such report given to the above-named party.

I FURTHER DECLARE that a photocopy of this Authorization shall be of the same force and effect as an originally signed copy.

Dated at _____ in the Province of _____ this _____ day of _____, _____

Signature of Eligible Person