



REQUEST FOR BIRTH CERTIFICATE WITH NAME CHANGE ON AFFIDAVIT

The following form needs to be completed in its entirety in order to apply for your Birth Certificate with your name change through an Affidavit. Please include Affidavit with this request.

Applicant's Surname (Last Name):		Applicant's Maiden Name (If Applicable):	
Applicant's First Name:		Applicant's Middle Name (If Applicable):	
Applicant's Date of Birth:		Applicant's Place of Birth (Parish):	
Applicant's Cellular No.:	Applicant's E-Mail Address:		
Date of Marriage:		Parish of Marriage:	
Mother's First Name and Maiden Name:		Mother's Date of Birth:	
Mother's Place of Birth (Parish):	Applicant's Return Address:		
Fee US\$18.00. (US\$17.00 fee and US\$1.00 for regular return postage. Make <i>International Postal Order</i> payable to: <i>Deputy Registrar General</i>).			

FORWARD APPLICATION AND FEE TO:

DEPUTY REGISTRAR GENERAL

Births, Deaths and Marriage Certificates

Ministry of Health

Ministerial Complex

Botanical Gardens

Tanteen

St. George's

GRENADA, W. I.

Tel. (473) 440-2806