

APPLICATION TO REGISTER AN OVERSEAS BIRTH

Please print using a black or blue pen referring to the guidance notes for additional information

1. DETAILS ABOUT THE CHILD

First Name <input type="checkbox"/> *	Middle Name (s)	Surname	
Date of Birth:		Time of Birth (<i>if multiple birth</i>)	FOR OFFICE USE ONLY
Place of Birth:			Certificate Number
Name of Hospital (<i>as shown on the local birth certificate</i>):			Date issued:
City/Town		Country	FOR OFFICE USE ONLY
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		Is the child a surrogate or has he/she been adopted? <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Claim to citizenship:</i>

* Please tick here if you want the Anglicized form of the child's forename/s on the Birth Registration.

2. FATHER'S DETAILS

First Name	Middle Name(s)	Surname	FOR OFFICE USE ONLY
Date of Birth:			
Place of birth	Town	County (<i>if applicable</i>)	COUNTRY
Occupation when child was born:			
If British and born outside the UK, give details:			<i>Claim to citizenship:</i>

3. DETAILS ABOUT THE PARENT'S MARRIAGE (IF APPLICABLE):

FATHER	MOTHER	DATE OF MARRIAGE <i>(if applicable)</i>			If previously married, how many previous marriages?		
<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWER <input type="checkbox"/> DIVORCED	<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWER <input type="checkbox"/> DIVORCED	Date	Month	Year	Father	Mother	

4. MOTHER'S DETAILS

First Name	Middle Name(s)	Surname		FOR OFFICE USE ONLY
Maiden Name:		Surname at Marriage <i>(if different from Maiden Name)</i>		
Date of Birth:				
Place of birth	Town	County <i>(if applicable)</i>	COUNTRY	
Occupation at the time of child's birth:				
If British and born outside the UK, give details:				<i>Claim to Citizenship</i>

5. DETAILS ABOUT THE INFORMANT *(i.e. person completing this form):*

FIRST NAME & SURNAME Mr / Mrs / Ms / Miss	Relationship to child <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Self <input type="checkbox"/> Other.....
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6. POSTAL ADDRESS

House/Flat Number:				
Street:				
Town				
Postcode				
Telephone	<i>Work</i>	<i>Mobile</i>	<i>Home</i>	<i>Email Address</i>
DECLARATION: To the best of my knowledge. I declare that the information submitted in this form is true.				Please state number of certificates required
Signed:		Date:		

CHECKLIST

- The child's full overseas birth certificate naming both of parents.
- The parent's full birth certificate, or if born outside the United Kingdom, documentary evidence of their claim to British nationality, e.g. naturalization or registration certificate.
- The parent's marriage certificate and, if appropriate, evidences of the termination of any previous marriage of either parent.
- Father's or mother's British passport.
- Fee made payable to Consular section, British Embassy, Athens by Postal order or by cash.