



**Registry of Civil Status
Application for Vital
Record(s)**

For Official Use

Application Clerk: _____ Time: _____

Cashier's Signature: _____

Amt: _____ Time: _____

Receipt No.: _____

1. Applicant's Information

First Name: _____ Last Name: _____

Residential Address: _____

Employment Address: _____

Cell Phone #: _____ Home #: _____ Work #: _____ Email Address: _____

NIC #: _____ Form of ID: _____

Are you the: Mother Father Sister Brother Other: _____

2. Wedding Information

Date of Wedding (dd/mm/yy): ____/____/____ Parish: _____

Church/Denomination/Other: _____

3 Bride's Information

Last Name:

First Name:

Middle Name(s): _____ Date of Birth (dd/mm/yy): ____/____/____

4. Groom's Information

Last Name:

First Name:

Middle Name(s): _____ Date of Birth (dd/mm/yy): ____/____/____

5. Certificate Information

Citation

Number of copies: _____ Regular/Expedited
(\$8.00/\$13.00 per standard copy)

Signature: _____ Date: _____

Received by: _____ ID: _____

Registrar's Rectification:

I hereby Authorize the Registrar/Adjudicator of the Civil Status Registry to Amend/Rectify (if necessary) the above mentioned vital record(s) of the subject.

Signature: _____ Date: _____