



# Application for a Change of Sex Designation on Birth Registration and Birth Certificate

## Instructions:

1. This application form is only for use by an applicant whose birth is registered in Manitoba.
2. Print clearly using black ink. Do not use correction fluid or tape on any of the documents. If you make an error, strike out the incorrect information and then write the correct information above or below the error. Initial every change you make on the form.
3. Your application will be returned if all of the required sections of this application are not completed, including:
  - Proof of Identity — Bring photo identification or enclose a confirmed or notarized copy (see Section A)
  - Contact/Mailing information, Birth information (Section A)
  - Statutory Declaration signed before an eligible witness (see Section B)
  - All previously issued Manitoba Birth Certificates
  - Supporting letter from a Canadian medical practitioner, nurse practitioner, psychologist or psychological associate  
OR
  - See Vital Statistics Agency's website for details on alternate supporting materials that may be accepted
  - \$30 fee to amend sex designation on a Manitoba Birth Registration (see Section D)
  - Application for a Manitoba Birth Document plus \$30 fee for a new Manitoba Birth Certificate (see Section D)
4. Submit your application form, all supporting documents and payment to Vital Statistics Agency:

***Deliver in person***

8:30 am - 4:00 pm Monday to Friday (office closes at 4:30 pm)

or

***Send by registered mail to***

Vital Statistics Agency  
254 Portage Avenue  
Winnipeg, Manitoba R3C 0B6

5. **This application will not result in a legal change of name.** Please contact Vital Statistics Agency to determine your eligibility for a legal change of name in Manitoba and information about the legal change of name process.
  - Check if this application is accompanied by an Application for a Legal Change of Name

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## **NOTICE UNDER THE FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT**

The personal information requested on this form is collected for the purpose of a change of sex designation application under section 25 of *The Vital Statistics Act*. If you have questions about the collection or use of this information, please contact Vital Statistics Agency.

### **Inquiries**

Telephone: 204-945-3701 } ask for Confidential Services  
Toll-Free (within Canada) 866-949-9296 }  
E-mail: vitalstats@gov.mb.ca  
Web-Site: <http://vitalstats.gov.mb.ca>  
Address: 254 Portage Avenue  
Winnipeg, Manitoba R3C 0B6

Available in other formats upon request  
Disponible en français

## SECTION A: ELIGIBILITY, PROOF OF IDENTITY & APPLICANT INFORMATION

Your birth must be registered in Manitoba to apply for a change of sex designation on your birth registration/birth certificate.

### PROOF OF IDENTITY - MUST BE CONFIRMED BY VITAL STATISTICS AGENCY OR STATUTORY DECLARATION WITNESS

You must provide proof of your current identity. This is usually government issued photo identification such as a driver's licence, provincial identity card, passport or Certificate of Indian Status. Please see Vital Statistics Agency's website for a complete list.

- If you deliver your application to Vital Statistics Agency, please **bring your identification**.
- If you send your application to Vital Statistics Agency by registered mail, the **person who witnesses your Statutory Declaration** (see Section B) must **examine your original identity document** and confirm or notarize it. **Confirmation** of your identity document within Manitoba can be done by the witness **making a photocopy and writing on it**:

"I       (witness)      , confirm that I have compared the photo, signature and particulars on the original identity document to the applicant and this is a true copy of the       (identity document type and number)       issued to       (applicant's name as shown on document)      ", **followed by the witness's signature**.

If you do not have any valid photo identification, please contact Vital Statistics Agency to discuss other potential options.

Name on Identity Document (last name and all given names or initials in exact order)

Enclosed: confirmed or notarized copy of identity document

OFFICE USE ONLY

Type of Identity Document:

Document Number:

### APPLICANT'S CONTACT/MAILING INFORMATION

Please identify if you wish Vital Statistics Agency to use a different **preferred name** if we need to contact you by email, mail or phone

Preferred Last Name

Preferred First Name(s)

### Current Mailing Address

Unit Number

Street Number

Street Name

PO Box

City / Town

Province / Territory / State

Country

Daytime Phone Number(s)

Postal / ZIP Code

Email Address

### INFORMATION ON APPLICANT'S CURRENT BIRTH REGISTRATION/BIRTH CERTIFICATE

Last Name

First Name

Middle Name(s)

Date of Birth

Sex on Current Birth Registration/Certificate

Month

Day

Year

Male

Female

Place of Birth (City / Town)

M A N I T O B A

### Father or other parent on current registration of birth

Last Name

First Name

Middle Name(s)

### Mother or other parent on current registration of birth

Maiden Last Name

First Name

Middle Name(s)

## SECTION B: APPLICANT'S STATUTORY DECLARATION

I, \_\_\_\_\_ do solemnly declare that:  
(Applicant's current full legal name, as shown on Identity Document in Section A)

1. I identify with the requested sex designation of  Male  Female
2. I am currently living full-time in a manner consistent with the requested sex designation and intend to continue doing so.
3. The information provided in this application is true and complete to the best of my knowledge.
4. I am making this application in good faith and not for any improper purpose. I understand that it is an offence to wilfully make a false or misleading statement in this application.
5.  I am enclosing all previously issued Manitoba birth certificates.  
OR  
 I don't have a birth certificate because \_\_\_\_\_.
6. I understand that any previously issued birth certificates will no longer be valid upon completion of my change of sex designation and that they will be cancelled. Vital Statistics Agency will not return certificates submitted with this application.
7. I understand that it is an offence for me or anyone else to wilfully possess or use a birth certificate that has been cancelled.

### Declared before me at

on \_\_\_\_\_  
City or Town and Country

\_\_\_\_\_  
Month / Day / Year

X

\_\_\_\_\_  
Signature of Commissioner for Oaths,  
Justice of the Peace, Notary Public, etc.

Print Name and Appointment Expiry Date

Name:

Expiry Date:

I make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

X

\_\_\_\_\_  
Signature of Applicant

### WHO MAY WITNESS YOUR STATUTORY DECLARATION — also see Section A "PROOF OF IDENTITY"

If your Statutory Declaration is signed in Manitoba, it must be signed before someone authorized in *The Evidence Act*. The following are some examples. For a complete list of authorized witnesses, please see the Vital Statistics Agency's website or contact Vital Statistics Agency.

- A commissioner for oaths (available at Vital Statistics Agency if you deliver your application in person)
- A Manitoba justice of the peace or the judge of any court in Manitoba
- A lawyer authorized to practise in Manitoba
- A notary public appointed for Manitoba
- A mayor, reeve, or clerk of any Manitoba municipality
- A secretary-treasurer of any Manitoba school district or school division
- The postmaster of any post office in Manitoba
- A member of the Royal Canadian Mounted Police Force
- A commissioned officer in the Canadian Forces who is on full time service

If you are sending your application to Vital Statistics Agency by registered mail, the person who witnesses your Statutory Declaration must also confirm or notarize a copy of your identity document. Please see Section A "PROOF OF IDENTITY" for details.

If your statutory declaration is signed outside Manitoba, please see the Vital Statistics Agency's website or contact Vital Statistics Agency for a list of authorized witnesses.

## SECTION C: SUPPORTING LETTER FROM HEALTH CARE PROFESSIONAL

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
**(Health Care Professional's  
Office address)**

\_\_\_\_\_  
**(Date)**

Director, Vital Statistics Agency  
254 Portage Avenue  
Winnipeg MB R3C 0B6

### **Support for a change of sex designation Subsection 25(8) of *The Vital Statistics Act***

1. My health care profession is:
  - Medical Practitioner (examples: physician, psychiatrist or surgeon)
  - Nurse Practitioner
  - Psychologist
  - Psychological Associate (independent practice)
2. My professional regulatory authority is \_\_\_\_\_.  
I am in good standing with that regulatory authority. My certificate/license/registration number is \_\_\_\_\_.  
(If outside of Canada, attach evidence of qualification to practice in that jurisdiction.)
3. I have treated or evaluated the applicant, whose current full legal name is:  
\_\_\_\_\_, and whose date of birth is \_\_\_\_\_.
4. The duration of my professional relationship with the applicant has been \_\_\_\_\_.
5. My professional opinion is that the sex designation of  Male  Female on the applicant's current identification is inconsistent with the sex with which the applicant identifies.
6. My professional opinion is that the sex designation of  Male  Female requested by the applicant is consistent with the sex designation with which the applicant identifies.
7. CHECK ONLY IF THE APPLICANT IS A MINOR  
 The applicant is a minor and my professional opinion is that the minor has the capacity to make health care decisions.

\_\_\_\_\_  
Health Care Professional's original signature

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Health Care Professional's Telephone Number

\_\_\_\_\_  
Print, stamp or type name of Health Care Professional

### **NOTES FOR HEALTH CARE PROFESSIONALS**

1. **The essential contents of this letter may alternatively be provided on the Health Care Professional's letterhead.**
2. Vital Statistics Agency relies on health care professionals to exercise their professional judgement in accordance with their experience, expertise and contact with the applicant to determine whether the applicant's sex designation on their birth registration should be changed. For additional resources, health care professionals may refer to the guidelines established by the World Professional Association for Transgender Health (WPATH) Standards of Care at [www.wpath.org](http://www.wpath.org), or may consult the Trans Health Program at Klinik Community Health Centre or the Gender Dysphoria Assessment and Action for Youth (GDAAY) Clinic.

## SECTION D: FEES

### Vital Statistics Agency Fees

- |                                                                                                            |                |
|------------------------------------------------------------------------------------------------------------|----------------|
| 1. Fee to process application for a change of sex designation on a birth registration:                     | \$30.00        |
| 2. The fee for a birth certificate showing new sex designation is (rush service not available):            | <u>\$30.00</u> |
| A separate <i>Application for a Manitoba Birth Document</i> must be submitted along with this application. | \$60.00        |

**These fees do not include a legal change of name.** For information about legal name changes, contact Vital Statistics Agency.

### Method of Payment

<input type="checkbox"/> Cash	} In person only	I authorize the Vital Statistics Agency to charge to my card \$ _____	
<input type="checkbox"/> Debit card			
<input type="checkbox"/> MasterCard / Visa	} Payable to the Minister of Finance	_____	
<input type="checkbox"/> Money Order		Credit card number	_____
<input type="checkbox"/> Certified Cheque			Expiry date
		_____	
		Name on credit card	Cardholder's signature

## SECTION E: ENCLOSURE CHECKLIST

Before bringing or mailing your application and supporting documents to Vital Statistics Agency, please ensure that you have completed the following steps. If information is missing, or fees are not submitted, your application will not be processed and will be returned to you.

#### Section A:

- Eligibility — My birth is registered in Manitoba
- Proof of Identity — Bring photo identification or enclose a confirmed or notarized copy (see "Proof of Identity" in Section A)
- Contact/Mailing information, Birth information

#### Section B:

- Statutory Declaration — Bring to Vital Statistics Agency and sign before a staff member who is a commissioner for oaths, or sign before an eligible witness (see section B)
- All previously issued Manitoba Birth Certificates

#### Section C:

- Supporting letter from a Canadian medical practitioner, nurse practitioner, psychologist or psychological associate (may be part of this application form, or may be completed separately by the health care professional)
- OR
- The Director has authority to consider certain types of alternative supporting materials, particularly if you live or formerly lived outside Manitoba or Canada for an extended period. Please see Vital Statistics Agency's website or contact Vital Statistics Agency for details.

#### Section D:

- \$30 Fee to amend sex designation on a Manitoba Birth Registration
- Application for a Manitoba Birth Document and \$30 Fee for a new Manitoba Birth Certificate (rush service is not available for birth certificates associated with a change of sex designation)

### OFFICE USE ONLY / RÉSERVÉ À L'ADMINISTRATION

Checked: \_\_\_\_\_

Entered: \_\_\_\_\_

Reg. # \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Issued: \_\_\_\_\_