

# Order Form – Commemorative Birth Certificates



## Vital Statistics Agency

254 Portage Avenue  
Winnipeg, MB, Canada R3C 0B6

Inquiries: Telephone (204) 945-3701  
Toll-Free 1-866-949-9296  
(within Canada)  
Service en français (204) 945-5500  
Fax (204) 948-3128  
E-mail vitalstats@gov.mb.ca

**Mailing Address**  
Please print your name and address clearly. This portion will be used when mailing your certificate.

Name		
Address	Apt. No.	
City	Province	Postal Code

**File number:**

Last Name		Given Name(s)		Sex
Date of Birth	Month	Day	Year	Place of Birth <b>MANITOBA</b>
Last Name of Father		Given Name(s)		Birthplace
Maiden Name of Mother		Given Name(s)		Birthplace

Certificate Type	Quantity		Amount	
	English	French		
<b>Official Birth Certificate for Identification Purposes</b>				
With Parents' Names 5" x 7" (12.5 cm x 17.6 cm)			@ \$25	
Without Parents' Names 5" x 7" (12.5 cm x 17.6 cm)			@ \$25	
24-hour Rush Service (includes certificate and courier delivery within Canada)			@ \$60	
<b>Treasured Event Commemorative Birth Certificate</b>	English	French		
NEWBORN (Baby Photo) Suitable for framing 11" x 14" (28 cm x 35.5 cm)			Single @ \$25	Combination @ \$20
Suitable for Baby Album 7" x 8.5" (17.5 cm x 21.5 cm)			@ \$25	@ \$20
CLASSIC (MB Flag) Suitable for framing 11" x 14" (28 cm x 35.5 cm)			@ \$25	@ \$20
HERITAGE (MB emblems) Suitable for framing 11" x 14" (28 cm x 35.5 cm)			@ \$25	@ \$20
		TOTAL		\$

**SPECIAL COMBINATION OFFER**

If an official certificate and commemorative certificate are purchased at the same time, the cost of the commemorative certificate is reduced to \$20.

<p><b>Payment</b></p> <p>1. Cash or Debit Card (in person only) or</p> <p>2. Enclosed is a cheque/money order for \$ _____ payable to the Minister of Finance or</p> <p>3. Enclosed is a/are gift certificate(s) for \$ _____ or</p> <p>4. Credit Card <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa</p> <p>Card Number: _____</p> <p>Expiry Date: _____</p> <p>Name on Card (please print) _____</p> <p>Signature of Cardholder: _____</p>	<p><b>NOTE:</b> Personal cheques, unless certified will <b>NOT</b> be accepted for 24-hour RUSH service.</p> <p><b>Notice under <i>The Freedom of Information and Protection of Privacy Act</i></b></p> <p>The information requested on this form is collected pursuant to <i>The Vital Statistics Act</i> to fulfill the requirements for the release of birth, marriage and death information. If you have any questions regarding the collection or use of this information, please contact the Director of the Vital Statistics Agency at the address above.</p>
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**IMPORTANT: SIGNATURE OF PERSON ENTITLED TO CERTIFICATE(S) MUST BE GIVEN.**

Reason for Application	Tel. No. – Business
Your relationship to Person Named on Certificate	Tel. No. – Home
<p>WHO IS ENTITLED TO APPLY FOR BIRTH CERTIFICATES</p> <p>a) You, if the application is for your own certificate</p> <p>b) Parents of a child</p> <p>c) Guardian (must submit guardianship papers)</p> <p>d) A representative with written authorization of a), b) or c) above</p>	<p>Signature of Person Entitled to Certificate</p> <p><b>X</b> _____</p>