

## *Information for completing an Access to Birth Records form*

### **Checklist**

#### **Have you completed the following?**

- I have completed all **THREE (3)** pages of the form and I have dated and signed **Part 1** and **Part 2**.
- I have printed my FULL NAME clearly in PART 2 of the form, with no initials or omissions, and I have indicated any previous names in the spaces provided.
- I have had a Commissioner for Oaths, a Notary Public, or a designated professional act as my witness for Part 1 of the form by signing, dating, and providing her or his designation (for further information about who can witness please see *Information about the witness* section).
- I have provided a PHOTOCOPY of TWO (2) pieces of valid, government-issued identification, one of which is photo identification, **which has been certified as a true copy of the original, signed and dated by my witness** (for further information about the photocopy please see *Information about the photocopy* section).
- My witness has provided her or his CONTACT INFORMATION on the PHOTOCOPY of my identification and/or on Part 1 of my form, including her or his occupation or designation, place of employment, address and a **daytime telephone number** where she or he can be reached. A Commissioner for Oaths must provide a commission expiry date.

# Access to Birth Records

Related to section 107 of *The Adoption Act*

## Access to Birth Records

- Manitoba's legislation provides for access to different documents depending on which party you are to the adoption:
  - If you are the **birth parent**, you may apply for access to the pre-adoption birth registration and the substituted registration of birth.
  - If you are the **adoptee**, and you were **born in Manitoba** and your adoption was granted either in Manitoba or outside of Manitoba, you may use this form to apply for access to the pre-adoption birth registration.
  - If you are the **adoptee**, and you were **born outside of Manitoba** and your adoption was granted in Manitoba, you may apply for access to identifying birth and adoption registration information, including identifying information set out in the pre-adoption birth registration and the adoption order.

If you are the:	Birth parent	Adoptee – born in MB	Adoptee – born outside of MB
<b>You can use this form to request access to:</b>			
Pre-adoption birth registration	Yes	Yes	No
Substituted registration of birth	Yes	No*	No
Adoption order	No	No**	No**
Identifying birth and adoption registration information	No	No	Yes
Any other documents on file	Yes	Yes	No

\*Available through the Manitoba Vital Statistics Agency for a \$30 fee.

\*\*Available through the Manitoba Court, for a \$20 fee set by the Manitoba Court (fee subject to change).

- If a Disclosure Veto has been filed, some of the identifying information in the documents you request may not be available to you.
- If the Manitoba Post-Adoption Registry conducted a search for a birth parent or an adopted adult and either of them refused to register to have personal contact and share their identifying information, that person's identifying information will not be available to you.
- If a Contact Veto or Contact Preference has been filed, you will be required to fill out an Undertaking form indicating you agree to comply with the terms of the veto/preference. If you do not fill out the Undertaking, identifying information will be removed from the documents provided to you.
- If you are a **birth parent** and are applying for access to records for more than one child, you must complete a separate form for each child.

# Access to Birth Records

Related to section 107 of *The Adoption Act*

## **Filling out the form**

- Please read these instructions before filling out the form.
- Please fill out the form to the best of your ability. Leave blank any sections that are not applicable or are unknown to you.
- **Please print clearly in ink.**
- If you have questions or need help filling out the form:
  - Contact your local [Child and Family Services agency](#), or
  - Call the Manitoba Post-Adoption Registry at 1-855-837-5542 (toll free in Canada and the US).
- If after submitting this form you change your name, telephone number(s), or if you move, notify the Manitoba Post-Adoption Registry or complete a *Change of Information* form.
- **Available in other formats upon request.**

## **PART 1: My Consent to Collection of Information**

**Read** the statements. **Sign and date the consent if you agree with the statements.** If you do not agree with the statements you do not have to sign. Without your consent, the form cannot be filed.

**Your witness must also sign and date in the appropriate areas to verify your consent.** For information about who can act as a witness refer to the *Information about the witness* section.

### Government-issued identification:

- Indicate in the blanks which of TWO (2) pieces of valid, government-issued identification (one of which is photo identification) you have photocopied and attached to your form. Examples include: Social Insurance Number, health card, Secure Certificate of Indian Status card, driver's license, passport, birth certificate. Contact the Manitoba Post-Adoption Registry at 1-855-837-5542 (toll free in Canada and the US) to see what other forms of identification can be accepted.
- This photocopy must be verified by a Commissioner for Oaths, Notary Public, or a designated professional. The witness must see the original identification and verify that the photocopy matches the original documents.

\*\*\*For more information on the photocopy process, see *Information on the photocopy*. \*\*\*For more information on who can be a witness, see *Information about the witness*.

**NOTE:** Your identification may not be accepted if it is not current. If you have recently moved or changed your name, your identification may need to be updated before you can apply for access to records. If you live in another province/country please provide appropriate identification from your place of residence.

# Access to Birth Records

Related to section 107 of *The Adoption Act*

## PART 2: Collection of Information

- **Please print clearly in ink in each section.**

### Section A. My name is:

- Provide your full first name, middle name(s) and last name.
- If your name has changed due to marriage, divorce, or other reasons, provide your previous name(s).
- Indicate your complete birth date.
- Indicate if you are the birth parent, adoptee, or adoptive parent.
- Provide your complete **current** address, detailing: city/town, province/state, country, and postal code/zip code.
- Indicate your **current** home, work, and cell telephone number(s), and your email address(es).

### Section B – Birth and adoption information:

- Fill out this section to the best of your ability, providing information if you know it. There may be some spaces you leave blank.
- The birth parent will fill out the section under the heading “If you are the **birth parent**, please fill out the section below.” Indicate the name of the child at birth, and the child’s date of birth, if known. If you are unsure of the exact date of birth, include the year, to the best of your ability. Indicate the location/community where the birth took place, if known. Indicate the names of the birth mother and the birth father at the time the child who was adopted was born, if known.
- The adoptee will fill out the section under the heading “If you are the **adoptee**, please fill out the sections below.” Indicate your full name and your date of birth. Indicate the location/community where your birth took place, if known. Indicate the full names of your adoptive mother and adoptive father.

### Section C. My consent to apply for Access to Birth Records:

- **Read, sign and date**, confirming your consent.
- Section C confirms your consent for the Manitoba Post-Adoption Registry to file your Access to Birth Records form and ensures that the consent remains with the information collected.
- **NOTE: Your form will not be processed if you have not signed and dated both Part 1 and Part 2.**

# Access to Birth Records

Related to section 107 of *The Adoption Act*

## **Submitting the form**

**1. IN PERSON:** If you are in Manitoba, you can submit your form in person. Take your completed version of Part 1 and Part 2 of this form, with the properly verified photocopy of two pieces of identification, one of which is photo identification to a Child and Family Services agency. CFS staff will submit your form to the Manitoba Post-Adoption Registry on your behalf.

- In Manitoba, please contact your local [CFS agency](#).

**2. BY MAIL:** You can also submit your form by mail. Send a completed version of Part 1 and Part 2 of this form, with the properly verified photocopy of two pieces of identification, one of which is photo identification by mail to:

**Manitoba Post-Adoption Registry**  
**2<sup>nd</sup> floor – 777 Portage Avenue**  
**Winnipeg MB R3G 0N3**  
**Canada**

### **Inquiries**

Telephone: 1-855-837-5542 - toll free in Canada and the US

Email: [cfsd@gov.mb.ca](mailto:cfsd@gov.mb.ca)

Website: [manitoba.ca/adoptionrecords](http://manitoba.ca/adoptionrecords)

Address: Manitoba Post-Adoption Registry  
2<sup>nd</sup> floor – 777 Portage Avenue Winnipeg MB R3G 0N3 Canada

#### **Information and Privacy Notice**

Manitoba Family Services is authorized to collect personal information and personal health information under subsection 36(1) clause (b) of *The Freedom of Information and Protection of Privacy Act* ("FIPPA") and subsection 13(1) of *The Personal Health Information Act* ("PHIA") respectively, as the information is directly related to and necessary for the purposes of protecting the applicant's information related to birth and adoption records. We have limited the information we are collecting about you to the minimum amount necessary for these purposes. Your information is protected by the protection of privacy provisions of FIPPA and PHIA. We cannot use or disclose it for any other purpose, unless you consent or we are authorized or required to do so by FIPPA, PHIA, or *The Adoption Act*. If you have any questions about your information, please contact the FIPPA Coordinator at 1-204-945-2013 at 500-326 Broadway, Winnipeg MB R3C 0S5.

# Access to Birth Records

Related to section 107 of *The Adoption Act*

## Information about the witness

PLEASE NOTE: FAILURE TO HAVE A WITNESS VERIFY YOUR PHOTOCOPIED IDENTIFICATION DOCUMENTS AND PART 1 OF YOUR FORM WILL MEAN THAT YOUR FORM CAN NOT BE PROCESSED.

In order for your form to be processed it must be accompanied by a photocopy of TWO (2) valid pieces of government-issued identification, one of which must be photo identification. Your photocopied identification and Part 1 of your form must be verified and signed by a *witness*. An acceptable witness is a Commissioner for Oaths, a Notary Public or a designated professional.

- A Notary Public can usually be found in a law office.
- A Commissioner for Oaths may be found in the offices of:
  - Real Estate Agents or General Insurance Agents
  - Professional Accountants
  - Rural Post Offices
  - Municipal Offices
  - High School Principals (usually in Winnipeg, Manitoba only)
  - Police OfficersNote: An appointment may be required and there may be a fee for this service.
- For the purposes of witnessing your signature on Part 1 and for verifying the photocopy of your identification documents, a designated professional is considered to be one of the following:
  - Dentist/Medical Doctor/Chiropractor/Optometrlist/Psychologist
  - Lawyer
  - Minister of Religion
  - Pharmacist
  - Principal or teacher at a primary or secondary school
  - Judge/Magistrate/Police Office/RCMP
  - Justice of the Peace
  - Postmaster
  - Professional Accountant who has a designation
  - Signing Officer or Manager at a Bank, Credit Union, Trust Company, or other financial institution
  - Senior Administrator, teacher, professor at a community college or university
  - Veterinarian
  - Social Worker
  - Chief of First Nations Band
  - Funeral Director
  - Nurse Practitioner/Registered Nurse
  - Member of Parliament
  - Member of the Provincial Legislature
  - Municipal Official
  - Official of a federal government department or provincial government department, or one of its agencies
  - Official of an embassy or consulate
  - Professional Engineer

**\*\*\*IMPORTANT:** Your witness must sign and date Part 1 of the form and the photocopy of your identification. **Your witness must also provide contact information**, including her or his occupation or designation, place of employment, address and a **daytime telephone number** where she or he can be reached. A Commissioner for Oaths must provide a commission expiry date.

# Access to Birth Records

Related to section 107 of *The Adoption Act*

## **Information about the photocopy**

As part of your form, you must provide a verified photocopy of the identification indicated in Part 1. You are responsible to ensure that the witness sees the **ORIGINALS OF TWO FORMS OF IDENTIFICATION** and is given a photocopy of these same documents.

The witness must:

1. **Examine** the original identification.
2. **Ensure** the original identification **matches** the photocopy.
3. **Sign and date the photocopy**, and type, write clearly or stamp her or his occupation or designation, place of employment, address and a **daytime telephone number** where she or he can be reached. A Commissioner for Oaths must provide a commission expiry date.
4. **Sign and date Part 1 of your form.**

**NOTE:** Failure to submit a properly verified photocopy of identification documents or failure to have Part 1 signed and dated by yourself and a witness will result in the rejection of your form.

Questions about filling out this form may be directed to your local [Child and Family Services agency](#) or to the Manitoba Post-Adoption Registry at 1-855-837-5542.



# Access to Birth Records

Related to section 107 of *The Adoption Act*

## PART 1. My Consent to Collection of Information

I understand that the Director of Child and Family Services (the Director) is obtaining my personal information described in Part 2 so that the Director can submit a request for Access to Birth Records to the Manitoba Vital Statistics Agency.

I understand that my personal information is being collected under the authority of subsection 36(1) clause (b) of *The Freedom of Information and Protection of Privacy Act* and that my personal health information, **if any**, is being collected under the authority of subsection 13(1) of *The Personal Health Information Act*.

I understand that I may revoke this consent by written statement at any time. Consent below is limited to this form only and becomes effective on the date signed. I hereby consent to the collection of information in Part 2 by the Director.

DATE: \_\_\_\_\_

YOUR SIGNATURE: \_\_\_\_\_

WITNESS PRINT NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

WITNESS SIGNATURE: \_\_\_\_\_  
(Commissioner for Oaths, or Notary Public, or designated professional)

### WITNESS INFORMATION:

Witness Occupation or Designation/Commissioner for Oaths commissioner expires:

\_\_\_\_\_

Place of employment: \_\_\_\_\_

Address: \_\_\_\_\_

Daytime telephone number: \_\_\_\_\_

### GOVERNMENT-ISSUED IDENTIFICATION:

I have chosen and presented **two (2)** pieces of identification, one of which is photo identification, to a Commissioner for Oaths, a Notary Public, or a designated professional who has witnessed my signature and verified the photocopy of the identification attached to this form. The pieces of identification I attached to this form are my (write in blanks below):

1. \_\_\_\_\_

2. \_\_\_\_\_

If you have any questions about the collection and disclosure of your personal information, contact your local [Child and Family Services agency](#), or call the Manitoba Post-Adoption Registry at 1-855-837-5542 (toll free in Canada and the US).



# Access to Birth Records

Related to section 107 of *The Adoption Act*

## PART 2: Collection of Information

### Section A. My name is:

First name	Middle name(s)	Last name
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Previous names (if applicable)

Your Date of Birth Year      /Month      /Day /      /	I am the: <input type="checkbox"/> Adoptee <input type="checkbox"/> Birth mother <input type="checkbox"/> Birth father
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### My contact information

Mailing address: Apartment number/Street number and name

City/Town	Province/State	Country	Postal/Zip Code
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Home telephone number Country code    Area Code    Phone number (    ) (    ) (    )	Work telephone number Country code    Area Code    Phone number (    ) (    ) (    )	Cell telephone number Country code    Area Code    Phone number (    ) (    ) (    )
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Email address(es)

### Section B. Birth and adoption information:

If you are the <b>birth parent</b> , please fill out the sections below:	If you are the <b>adoptee</b> please fill out the sections below:
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Child's full name at birth (if known):	Adoptee's full name:
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Child's date of birth (if known) Year      /Month      /Day /      /	Place of child's birth (if known)	Adoptee's date of birth Year      /Month      /Day /      /	Adoptee's place of birth (if known)
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Birth mother's full name at time of child's birth (if known)	Adoptive mother's full name
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Birth father's full name at time of child's birth (if known)	Adoptive father's full name
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# Access to Birth Records

Related to section 107 of *The Adoption Act*

## Section C. My consent to apply for Access to Birth Records:

I hereby authorize the Director of Child and Family Services to request access to birth records related to adoption at the Manitoba Vital Statistics Agency on my behalf.

I understand that:

- I will only be provided with the information to which I am entitled, subject to the availability of records, and any vetoes or preferences on file.

All the information provided on this form is accurate and complete as far as I know.

DATE: \_\_\_\_\_

YOUR SIGNATURE: \_\_\_\_\_