**APPLICATION FOR BIRTH RECORD**

**BIRTH RECORDS ARE CONFIDENTIAL:**

Copies may be issued only to the individual to whom the records pertain, one of the parents named on the record, an heir, a legal representative, or legal guardian or pursuant to a court order. (MCLA 333.2882)

1. NAME ON RECORD:

2. DATE OF BIRTH: Click or tap here to enter text.

3. PLACE OF BIRTH: Click or tap here to enter text.

4. FATHERS NAME: Click or tap here to enter text.

5. MOTHERS MAIDEN NAME: Click or tap here to enter text.

6. YOUR RELATIONSHIP TO PERSON NAMED IN #1 ABOVE:

[ ] Self [ ] Parent [ ]  Heir [ ] Legal [ ] Guardian

(Legal guardians must submit a copy of Guardianship Order and heirs

 must submit a copy of death record.)

7. IS THE PERSON NAMED ON LINE #1 ADOPTED? [ ] Yes [ ] No

8. NUMBER OF RECORDS DESIRED: Click or tap here to enter text.

 X

 Signature of applicant Date

MAKE CHECKS PAYABLE TO: Mackinac County Clerk

FEES: 1 Certified Copy is $20.00 and each additional copy is $10.00

**IF APPLYING BY MAIL OR EMAIL YOU MUST INCLUDE PHOTO COPY OF PICTURE ID**

Email to TSt.Andrew@mackinaccounty.net