



**Civil Registry
Adoption Act 1984
Adoption (Birth Records) Regulations 1985**

**Application for access to birth records by
person adopted on or after 1 January 1986**



1. I hereby apply for the information necessary to obtain a certified copy of the record of my birth.
2. I understand that a counselling service is available to me and I wish/do not wish* to see a counsellor.
* delete as applicable. If you have chosen to see a counsellor, tick the relevant box in 3 below.
3. I would like an interview with a counsellor to be arranged by:-

(a) the Isle of Man Local Government Board

(b) the adoption society approved under Section 14(2) of the
Adoption Act 1984 which arranged my adoption, which is*

(enter the name and address of the society)

* Please note that the adoption service on the Isle of Man is now provided by the Adoption Team, Family Placement Service, First Floor Murray House, Mount Havelock, Douglas, Isle of Man, IM1 2SF

4. The following are the particulars of my adoption:-

Full name and surname: _____

Date of birth: _____

Country of birth (if known): _____

Name of adoptive father: _____

Name of adoptive mother: _____

Date of adoption (if known): _____

5. I declare that to the best of my knowledge and belief I am the adopted person to whom the above particulars relate and that my adoption is recorded at entry no. _____ in the Adopted Children Register.

Signature: _____

Address: _____

Date: _____

The entry number will be found in the column headed "No. of Entry" on a full certificate and in the bottom left-hand corner of most short certificates

Please return this form to:-

Civil Registry, Registries Building, Deemsters Walk, Bucks Road, Douglas, Isle of Man, IM1 3AR