

Court Ordered Delayed Birth Registration Instruction Guide

Who Can Petition the Court For a Court Ordered Delayed Registration?

1. Pursuant to Arizona Revised Statute 36-333.02 and 36-333.03, an individual who has applied for a delayed birth registration with the Bureau of Vital Records and has received a letter of denial may petition the court for a court order.

What Information Should be Presented to the Court?

1. The denial letter issued by the Bureau of Vital Records, the information and evidentiary documents submitted to the Bureau of Vital Records must be submitted to the court.

How to Complete the Court Ordered Delayed Birth Registration Form

1. The registrant's birth facts must be entered in Part 1. Please complete the information on the form as it is to appear on the delayed birth record. Information entered should be supported by evidence. All fields on the form must be completed.
2. The information entered on the form must be typed. Do not use cross-outs, write-overs, erasures, correction fluid, or correction tape. If a mistake is made a new form must be prepared.
3. Use Sections A-C on the reverse side of the form to complete information concerning Race, Hispanic Origin and Tribal Community.
4. The natural parents' information must be entered in Part 2.
5. Part 3 must contain the information regarding the documentary evidence and other information used to support the court ordered delayed registration.
6. In Part 3, "registrant" means an individual who is 18 years of age or older or an individual emancipated by marriage or by a court order and has applied for the delayed birth registration with the Bureau of Vital Records. "Other" means an individual other than the registrant such as a parent, or legal guardian, etc. who applied for a delayed birth registration on behalf of the registrant because the registrant was less than 18 years of age.
7. The form must be reviewed for accuracy by the petitioner and court personnel. The petitioner must print and sign their name as indicated in Part 3. After the information contained on the form has been verified to be accurate, the form is ready for the final stage, certification.
8. Part 4: Certification of Clerk of Court - this section must be completed by the clerk of the court where the legal proceeding was finalized. The clerk must sign where designated and the court's seal/certification must be placed on the form where indicated.
9. Pursuant to A.R.S. 36-333.03.E, by the tenth day of each month, the Clerk of the Court must submit all finalized Court Ordered Delayed Registrations for the preceding month. The Court Ordered Delayed Registrations shall be mailed to:

**Bureau of Vital Records
P.O. Box 6018
Phoenix, Arizona 85005**

STATE OF ARIZONA
ARIZONA DEPARTMENT OF HEALTH SERVICES—BUREAU OF VITAL RECORDS
COURT ORDERED DELAYED BIRTH REGISTRATION

FOR OFFICE USE ONLY
DATE RECEIVED BY STATE OFFICE

- Type the information entered on this form. Do NOT use cross-outs, write-overs, erasures, correction fluid, or correction tape. If a mistake is made, prepare a new form.
- If you have any questions regarding this form, call (602) 364-1300 or (602) 364-2429.

PART 1: BIRTH FACTS OF REGISTRANT

BIRTH FACTS OF REGISTRANT	NAME AT BIRTH: FIRST		MIDDLE		LAST (PRIOR TO FIRST MARRIAGE)			SUFFIX
	SEX	RACE (SELECT FROM SECTION A AND ENTER IN THE SPACE BELOW)			DATE OF BIRTH:	MONTH	DAY	YEAR
	PLACE OF BIRTH: TOWN OR CITY				COUNTY			STATE

ARIZONA

PART 2: INFORMATION ABOUT NATURAL PARENTS

NATURAL PARENTS OF REGISTRANT	FATHER'S NAME: FIRST		MIDDLE		LAST			SUFFIX
	PLACE OF BIRTH (STATE OR COUNTRY)		DATE OF BIRTH	SOCIAL SECURITY NUMBER		RACE	IS THE FATHER OF HISPANIC ORIGIN? <input type="checkbox"/> YES <input type="checkbox"/> NO; IF YES WAS CHECKED, PLEASE SELECT ORIGIN FROM SECTION B AND ENTER HERE	
	MOTHER'S NAME: FIRST		MIDDLE		LAST NAME (PRIOR TO FIRST MARRIAGE)			CURRENT LEGAL LAST NAME
	PLACE OF BIRTH (STATE OR COUNTRY)		DATE OF BIRTH	SOCIAL SECURITY NUMBER		RACE	IS THE MOTHER OF HISPANIC ORIGIN? <input type="checkbox"/> YES <input type="checkbox"/> NO; IF YES WAS CHECKED, PLEASE SELECT ORIGIN FROM SECTION B AND ENTER HERE	
	MOTHER'S RESIDENCE AT THE TIME OF BIRTH (STREET ADDRESS)			CITY / TOWN		STATE		COUNTY
	WAS THE MOTHER'S RESIDENCE A TRIBAL COMMUNITY? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE SELECT THE TRIBAL COMMUNITY FROM SECTION C AND ENTER YOUR SELECTION HERE							

PART 3: DOCUMENTARY EVIDENCE AND INFORMATION

DOCUMENTARY EVIDENCE AND INFORMATION ACCEPTED BY THE COURT	DATE ESTABLISHED		TYPE OF DOCUMENT / EVIDENCE				
	DATE ESTABLISHED		TYPE OF DOCUMENT / EVIDENCE				
	DATE ESTABLISHED		TYPE OF DOCUMENT / EVIDENCE				
	DATE ESTABLISHED		TYPE OF DOCUMENT / EVIDENCE				
	OTHER INFORMATION		DESCRIBE:				

SIGNATURE OF REGISTRANT/ OTHER (REGISTRANT MUST BE 18 YEARS OR OLDER TO SIGN OR AN EMANCIPATED MINOR)	I ATTEST THE INFORMATION PROVIDED ON THIS FORM IS ACCURATE, TRUE AND VALID TO THE BEST OF MY KNOWLEDGE.		PLACE A CHECK MARK NEXT TO THE APPROPRIATE SELECTION <input type="checkbox"/> REGISTRANT <input type="checkbox"/> OTHER		PRINT NAME		DATE SIGNED
					SIGNATURE		

PART 4: CERTIFICATION OF CLERK OF COURT

CERTIFICATION OF CLERK OF THE COURT	A FINAL ORDER TO ESTABLISH A DELAYED BIRTH CERTIFICATE WAS GRANTED IN THE SUPERIOR COURT OF THIS STATE ON _____, 20____ IN CASE NO _____						
	JUDGE _____ PRESIDING						
	DATE SIGNED		BY		CLERK FOR COUNTY OF		
	CLERK OF COURT (IMPRESS COURT SEAL HERE)				UPON COMPLETION, MAIL THIS DOCUMENT TO:		

THE BUREAU OF VITAL RECORDS
P.O. BOX 6018
PHOENIX, AZ 85005

