



**Summers County, West Virginia
Birth Certificate Request Form**

Name of person on the certificate: _____ Date of Birth: _____

Place of Birth (City/Town) _____ Sex: ___Male ___Female

Parents:

Mother (Maiden Name) _____

Father _____

Requestor's Relationship:

___ Self ___ Parent/Grandparent ___ Guardian or agent ___ Spouse
___ Brother/Sister ___ Mother-in-law, Father-in-law, Son-in-law, Daughter-in-law
___ Child/Grandchild ___ Stepmother, Stepfather, Stepchild
___ other (describe) _____

By my signature, I certify that the above marked relationship is true.

(signature)

(printed name)

Enclosed is \$ _____ **for** _____ **copies (\$5.00 per copy).**
Please send check or money order. Do not send cash.

Return copies to (Requestors address):

City State Zip

Daytime telephone number () _____

Mail completed form to:

**Summers County Clerk
Attn: Vital Registration
120 Ballengee Street
Hinton, WV 25951
(304) 466-7104**