

# REQUEST FOR ALABAMA KEEPSAKE BIRTH CERTIFICATE

The Center for Health Statistics may issue a Keepsake Birth Certificate for anyone born in Alabama for whom there is a record on file in our office. Even though the Center began collecting birth certificates in 1908, most Keepsake Birth Certificates are requested for younger children, especially since **the Keepsake Birth Certificate is not a record that can be used for legal purposes.**

By Alabama law, birth certificates are confidential records with restricted access for 125 years from the date of birth. They may be obtained by the following persons, upon submission of valid identification (see reverse side) and payment of the proper fee:

Person Named on the Certificate, Mother/Father of Person Named on Certificate  
Husband/Wife of Person Named on Certificate, Son/Daughter of Person Named on Certificate  
Sister/Brother of Person Named on Certificate

If you are not one of the authorized individuals above, such as a grandparent, one of the above individuals **MUST** give you written and signed permission along with a copy of his/her valid identification to obtain a Keepsake Birth Certificate. Both items **MUST** accompany this request form, your valid identification and the required fee.

The fee to search for and provide one copy of a Keepsake Birth Certificate is **\$45.00**. Make check or money order payable to "State Board of Health." **FEES ARE NON-REFUNDABLE.** If the record is not located, you will receive a Certificate of Failure to Find but will still be responsible for the \$15.00 fee to search for the record. Each Keepsake Birth Certificate requested is \$45.00 even if additional certificates are requested on the same person.

**YOU MUST PROVIDE ALL INFORMATION BELOW AND SIGN THE APPLICANT SECTION OR YOUR REQUEST CANNOT BE PROCESSED. DO NOT USE THIS FORM to order legal certified copies of birth certificates.**

For additional information/questions call 334.206.5418 or visit our website at: [www.alabamapublichealth.gov/vitalrecords](http://www.alabamapublichealth.gov/vitalrecords).

**MAIL COMPLETED FORM WITH VALID IDENTIFICATION AND APPROPRIATE FEE TO:**  
**ALABAMA CENTER FOR HEALTH STATISTICS**  
**P.O. BOX 5625**  
**MONTGOMERY, ALABAMA 36103-5625**

## BIRTH:

Number of Copies Requested \_\_\_\_\_ Amount Enclosed \$ \_\_\_\_\_

Please indicate the design you would like: \_\_\_\_\_ Kites \_\_\_\_\_ Bunnies \_\_\_\_\_ Nature

FULL NAME AS ON BIRTH CERTIFICATE \_\_\_\_\_  
FIRST MIDDLE LAST

DATE OF BIRTH \_\_\_\_\_ SEX \_\_\_\_\_

COUNTY OF BIRTH \_\_\_\_\_ HOSPITAL \_\_\_\_\_

FULL NAME OF MOTHER/PARENT BEFORE FIRST MARRIAGE \_\_\_\_\_

FULL NAME OF FATHER/PARENT BEFORE FIRST MARRIAGE \_\_\_\_\_

**APPLICANT SECTION (THIS SECTION MUST BE COMPLETED)** Birth certificates less than 125 years old are restricted records. Valid identification must be submitted with a request for a restricted record. You must be an immediate family member OR demonstrate a legal right to the record in order to obtain a copy of the record (§ 22-91-21). Anyone falsely applying for a record is subject to a penalty upon conviction of up to three months in the county jail or a fine of up to \$500. Code of Alabama 1975, § 13A-10-109. By signing, you are certifying you have a legal right to the record requested.

Your Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Your Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Daytime Phone (\_\_\_\_\_) \_\_\_\_\_

Your Relationship to Person Whose Record is Being Requested \_\_\_\_\_

I allow the following individual to receive the Keepsake Birth Certificate \_\_\_\_\_

## IDENTIFICATION REQUIREMENTS FOR RESTRICTED ALABAMA VITAL RECORDS

Identification is required of any applicant requesting a restricted Alabama vital record (birth certificate less than 125 years from the date of birth or death certificate less than 25 years from the date of death). The applicant must submit a completed request and **one** form of identification from the **Primary ID** list below. In the event the applicant is unable to provide identification from the Primary ID list, he/she may provide **two** different forms of identification from the **Secondary ID** list.

If the applicant designates another individual to pick up a restricted certificate on his/her behalf, both the applicant **and** the designee must provide acceptable identification.

The completed request, as well as a copy of all identification submitted, will be maintained by the vital records office which processes the request.

<b>Primary IDs Including PHOTO (need at least one, current, expired no more than 60 days)</b>	<b>Secondary IDs (need at least two)</b>
<ul style="list-style-type: none"> <li>- Alabama Driver's License</li> <li>- Out-of-State Driver's License</li> <li>- State-Issued Non-Driver ID</li> <li>- U.S. or Foreign Passport</li> <li>- U.S. Certificate of Naturalization</li> <li>- Certificate of Citizenship</li> <li>- U.S. Military ID</li> <li>- Work ID (If applicant is employee of agency/company making request)</li> <li>- Alien Resident Card (Temporary or Permanent)</li> <li>- U.S. Employment Authorization Card</li> <li>- Citizenship ID Card</li> <li>- Tribal ID</li> <li>- Pilot's License</li> <li>- Boating License</li> <li>- Concealed Weapons License</li> <li>- Ex-Felon ID</li> <li>- Inmate ID issued by the U.S. Dept of Justice w/ following documentation:               <ul style="list-style-type: none"> <li>o Supporting documents from institution if inmate is still in custody, letter of release from institution if inmate has been released</li> </ul> </li> <li>- School ID (Must include current school term)</li> <li>- Alabama Voter Identification Card</li> </ul>	<ul style="list-style-type: none"> <li>- Expired, Government-Issued ID</li> <li>- Utility Bill (No more than 6 months old)</li> <li>- Work ID (If applicant is making personal request)</li> <li>- Vehicle Registration or Vehicle Title</li> <li>- Property Tax Bill</li> <li>- Military Discharge (DD Form 214)</li> <li>- Voter Registration Card</li> <li>- Health Insurance Card</li> <li>- Social Security Correspondence (not Card)</li> <li>- U.S. Selective Service Card</li> <li>- Recent DMV Receipt for Fines Paid</li> <li>- Fishing or Hunting License</li> <li>- Copy of Police Report or other official documents which support theft, in cases where individual's ID has been stolen</li> <li>- Autism Spectrum Card</li> <li>- Immunization (Shot) Record</li> </ul> <p style="margin-top: 10px;"><i>*In special cases where applicant is unable to provide any of these documents, please contact CHS at 334.206.5418.</i></p>