



Additional information to register a Birth with the Swiss authorities

14.04.2022

Information of the child	
Surname/family name:	
First names:	
Date of birth:	
Nationalities:	
Information of the mother	
Surname/family name:	
First names:	
Date of birth:	
Place + country of birth:	
Family name + first names of parents:	
Place of origin (if Swiss citizen):	
Nationalities:	
Address and country of residence <u>at the time of the child's birth:</u>	
<u>Current</u> address (including mobile number and e-mail address):	
<u>Marital Status at the time of the child's birth:</u> <input type="checkbox"/> Single (never married or in registered partnership) <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> In registered partnership <input type="checkbox"/> In dissolved partnership <u>If applicable:</u> Family name and first names of previous partner:	<u>Current</u> Marital Status: <input type="checkbox"/> Single (never married or in registered partnership) <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> In registered partnership <input type="checkbox"/> In dissolved partnership <u>If applicable:</u> Family name and first names of previous partner:

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Information of the father

Surname/family name:	
First names:	
Date of birth:	
Place + country of birth:	
Family name + first names of parents:	
Place of origin (if Swiss citizen):	
Nationalities:	
Address and country of residence <u>at the time of the child's birth:</u>	
<u>Current</u> address (including mobile number and e-mail address):	
<u>Marital Status at the time of the child's birth:</u> <input type="checkbox"/> Single (never married or in registered partnership) <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> In registered partnership <input type="checkbox"/> In dissolved partnership <u>If applicable:</u> Family name and first names of previous partner:	<u>Current Marital Status:</u> <input type="checkbox"/> Single (never married or in registered partnership) <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> In registered partnership <input type="checkbox"/> In dissolved partnership <u>If applicable:</u> Family name and first names of previous partner:
Place and date: Signature (mother): 	Place and date: Signature (father):