

Birth Certificate

Please print out this form and return to:

City of North Adams - City Clerk
10 Main Street
North Adams, MA 01247

Requests submitted through the mail will be processed on the date they are received.

Full name of person on the record of birth

First	Middle	Last
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Date of Birth

Month	Day	Year
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Full Maiden Name of the Mother

First	Middle	Last
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Full Name of the Father

First	Middle	Last
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Signature of Requester

Daytime telephone number

Area code	Number
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Return Mailing Address

- * Payment may be made in cash, money order, certified bank check or personal check.
- * Certified copies cost **\$10.00**; please enclosed a self-addressed stamped envelope.
- * Make money order or checks payable to **“City of North Adams”**.
- * **NOTE:** Please enclose a copy of your driver’s license.