

# Stillbirth Registration Details

Official Use Only	
Entry No. SB20	___ / ___ / ___
Date Registered	___ / ___ / ___
Stamp No.	_____
No. of Certs.	_____
Signed	_____

## 1. Details of Stillbirth

Forename(s) \_\_\_\_\_  
Surname \_\_\_\_\_  
Sex Male / Female / Undetermined  
Date of Stillbirth \_\_\_ / \_\_\_ / \_\_\_ Place of Stillbirth \_\_\_\_\_  
Gestation Period \_\_\_\_\_ (weeks) Weight at Stillbirth \_\_\_\_\_ (grams)  
Multiple Birth Yes / No If yes please state time of stillbirth \_\_\_\_\_

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## 2. Details of Mother

Forename(s) \_\_\_\_\_  
Surname \_\_\_\_\_  
Maiden Surname \_\_\_\_\_  
Previously Married Yes / No  
Surname at Marriage (if different from maiden name) \_\_\_\_\_  
Date of Birth \_\_\_ / \_\_\_ / \_\_\_ Place of Birth \_\_\_\_\_  
Place of Current Marriage \_\_\_\_\_ Date of Current Marriage \_\_\_ / \_\_\_ / \_\_\_  
Occupation \_\_\_\_\_  
No. of Previous Live Born \_\_\_\_\_ No. of Previous Still Born \_\_\_\_\_  
Current Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Post Code \_\_\_\_\_  
Home Tel. No. \_\_\_\_\_ Work Tel. No. \_\_\_\_\_  
Mobile No. \_\_\_\_\_ Email \_\_\_\_\_

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## 3. Details of Father

Forename(s) \_\_\_\_\_  
Surname \_\_\_\_\_  
Date of Birth \_\_\_ / \_\_\_ / \_\_\_ Place of Birth \_\_\_\_\_  
Occupation \_\_\_\_\_  
Current Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Post Code \_\_\_\_\_  
Home Tel. No. \_\_\_\_\_ Work Tel. No. \_\_\_\_\_  
Mobile No. \_\_\_\_\_ Email \_\_\_\_\_

**4. Certifying Doctor's or Midwife's Details**

Name of Doctor / or Midwife \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_

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**5. Details of Informant (Name and Address of Person Registering the Stillbirth)**

Forename(s) \_\_\_\_\_

Surname \_\_\_\_\_

Relationship \_\_\_\_\_

Current Address \_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_

Home Tel. No. \_\_\_\_\_ Work Tel. No. \_\_\_\_\_

Mobile No. \_\_\_\_\_ Email \_\_\_\_\_

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**6. Declaration**

**I confirm that I have checked that the details given on this form have been entered correctly,  
and the Registration is correct.**

Informant's Signature \_\_\_\_\_