



Your personal details

Title: _____

Forenames: _____

Surname: _____

Date of Birth: ____/____/____

Address: _____

Contact Number: _____

Email Address: _____

If you are an adopted person, complete this section

Name on original birth certificate: _____

Place/Area of Birth: _____

Birth mother: Name _____

Address _____

Birth father: Name- if known _____

Address _____

If you are a birth parent, complete this section

Birth mother's name: _____

Birth father's name: _____

Child's full name on original birth certificate: _____

Child's date of birth: _____

Child's place/area of birth: _____

If you are an adoptive parent complete this section

Child's full name on original birth certificate: _____

Child's date of birth: _____

Child's place/area of birth: _____

If you are a birth relative of an adopted person complete this section

Child's full name on original birth certificate: _____

Child's date of birth: _____

Child's place/area of birth: _____

Birth mother: Name _____

Address: _____

Birth father: Name – if known _____

Your relationship to adopted person: _____

Your signature

I wish the information that I have given be placed on the Adoption Contact Register for Scotland. I understand that the Register is confidential and that it is registered under the United Kingdom's Data Protection Act 1998.*

Signed _____

Date _____

Is it all right for you to receive calls from Birthlink staff? Yes No (Please circle)

What next.

Please return your registration form along with two items of identification, copies are acceptable. In addition we also require a copy of the adopted person's original birth information. If you need help to obtain this please give us a call.

Please note that if a link occurs you will be asked for a contribution towards the costs of mediation.

Please be aware that from time to time the Agency may contact you in connection with research projects and the possibility of your interest in participation

FOR OFFICE USE ONLY

Date received:

Date registered:

ACR ref:

ACR ref:

SAR: Yes/No

Name of Adoption Agency:

Date of Birthlink Link:

Date confirmation sent: