



Registration of Death – Division of Vital Statistics – Province of BC

Just as every "birth" must be registered with the government, so too, must every death be registered. The provincial government at the time of "death" requires the information below. As some of the information required may not be known to survivors, completing this form now avoids stress for the survivors at the time of death.

Surname: _____

All Given Names: _____

Sex: Female Male

Complete residence street address: *(If rural, please give exact location, not Post Office or Rural Route Address)*

City, town or other place *(by name)*: _____

Province/State: _____ Country _____ Postal Code: _____

BC Care Card Number: _____

Marital Status Never married Married Separated Widowed Divorced Common-law

If Married, Widowed or Divorced: *(please give full name of husband or full maiden name of wife)*

Kind of work done during most of working life:

Kind of business or industry in which worked:

Birthdate: *(m/d/y)* _____

Birthplace: *(city, town or other place)* _____ Province/State (or country) of birth: _____

Birthname if different: Surname: _____ All Given Names _____

Father's name: *(surname and given names)* _____

Father's birthplace: *(city or place, province/state or country)* _____

Mother's name: *(maiden surname and given names)* _____

Mother's birthplace: *(city or place, province/state or country)* _____

Family physician's name: _____

Address: _____ Postal Code: _____ Telephone: _____

Name of next-of-kin or executor: *(surname and given names)* _____

Address: _____ City _____ Province/State _____

Postal Code: _____ Telephone : _____

Relationship to deceased: _____

Email Address: _____

Additional Information:
