

Vital Records Office  
Vermont Department of Health  
280 State Drive  
Waterbury, VT 05671-8370  
802-863-7275 or 800-439-5008 (in VT only)

## Affidavit of Gender Identity

Amendment of Vermont Birth Certificate to Reflect Gender Identity

### Applicant Information:

If registrant is under 16 years of age, a parent or legal guardian must complete this form.

Applicant's relationship to person named on the birth certificate:

- Self (age 16 or older)  
 Parent of Minor Registrant  
 Legal Guardian of Minor Registrant

Applicant's current legal name: \_\_\_\_\_  
(First) (Middle) (Last)

Mailing Address: \_\_\_\_\_  
(Number and Street)

\_\_\_\_\_  
(City/Town) (State/Country) (Zip)

\_\_\_\_\_  
Daytime Phone (xxx-xxx-xxxx) Email address

### Registrant Information as it Appears on Current Birth Certificate:

Name: \_\_\_\_\_  
(First) (Middle) (Last)

\_\_\_\_\_  
Date of Birth (mm/dd/yyyy) Sex City/Town of Birth

<input type="checkbox"/> I am requesting that the sex on the birth certificate identified above be changed.	
Sex currently shown on record: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> X (Non-binary)	Sex as it should appear: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> X (Non-binary)

**Applicant Attestation: Sign your name ONLY in the presence of a Notary Public.**

*I attest that this request is for the purpose of affirming my/the registrant's gender identity, which is different than the sex shown on the current birth certificate.*

Signature of Applicant:\_\_\_\_\_ Date:\_\_\_\_\_

Print Name:\_\_\_\_\_

**Notary Public:**

Signed and sworn before me on Date:\_\_\_\_\_

Signature of Notary Public:\_\_\_\_\_

State and county of:\_\_\_\_\_

Commission Number:\_\_\_\_\_ Commission Expiration Date:\_\_\_\_\_

<p><b>Mail Form To:</b> Vermont Department of Health Vital Records Office 280 State Drive Waterbury, VT 05671-8370</p>	<p>To obtain a certified copy of the amended birth certificate, a separate application and related fee are required. For more information visit <a href="http://www.healthvermont.gov/VitalRecords">www.healthvermont.gov/VitalRecords</a></p>
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