

**REGISTRATION OF DEATH FORM**

**Information required by**

**Births, Deaths & Marriages**

**Surname at Death:**

**Given Name(s):**

**Surname at Birth:**

**Date of Birth: Date of Death: Age:**

**Place of Birth:**

**Year of arrival in Australia** (If applicable)**:**

**Residential Address:**

**Usual Occupation during working life:**

**Retired? Yes No Pensioner? Yes No Type:**

**Aboriginal / Torres Strait Islander: No Yes Aboriginal Torres Strait Islander Both**

**Gender: Male Female**

**Current Relationship Status of deceased person:**

Married Divorced Domestic Partner Registered Relationship

Never Married Widowed Unknown

**List all marriages of the deceased person starting with the first to the most recent.**

**Advise current relationship status of each marriage.**

**1. Place of Marriage:** (suburb/town,state, country)

**Date of Marriage: Age: Marital Status:**

**Given names of Spouse or Partner:**

**Surname of Spouse or Partner:**

**Surname at birth of Spouse or Partner:**

**2. Place of Marriage:** (suburb/town,state, country)

**Date of Marriage: Age: Marital Status:**

**Given names of Spouse or Partner:**

**Surname of Spouse or Partner:**

**Surname at birth of Spouse or Partner:**

**3. Place of Marriage:** (suburb/town,state, country)

**Date of Marriage: Age: Marital Status:**

**Given names of Spouse or Partner:**

**Surname of Spouse or Partner:**

**Surname at birth of Spouse or Partner:**

**Did the deceased have any children? No Yes How many children?**

List the current full names and birth surnames of all the deceased person’s children (including any legally adopted children). List the names in order of their birth from oldest to youngest. List their date of birth and age. If the child is deceased, enter ‘D’ in the age column. If not born alive, enter ‘SB’ (stillborn) in age column.

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| **Full Name Of Child****(Include current surname)** | **Birth Surname** | **Date of Birth** | **Age** |
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**Parent Details of the deceased person:**

**Father/Parent’s Surname:**

**Father/Parent’s Given Name(s):**

**Occupation during working life:**

**Mother/Parent’s Surname:**

**Mother/Parent’s Surname at Birth:**

**Mother/Parent’s Given Name(s):**

**Occupation during working life:**

**Informant:**

**Information Supplied By (Full Name):**

**Relationship to deceased person:**

**Signature: Date:**