



Vital Statistics  
Agency

**NO-CONTACT DECLARATION AND STATEMENT  
Pertaining to an Adopted Person or Birth Parent**

## ADOPTION ACT: No-Contact Declaration and Statement

- Under section 66 of the *Adoption Act*, a birth parent of an adopted person who is named in an original birth registration and who wishes not to be contacted by the person named as the child in the registration, may apply to the registrar general of the Vital Statistics Agency to file a written no-contact declaration.
- An adopted person 18 years of age or older who wishes not to be contacted by a birth parent named on a birth registration may apply to the registrar general of the Vital Statistics Agency to file a written no-contact declaration.
- When an applicant applies to the Vital Statistics Agency under this Part, they must supply any proof of identity required, and the registrar general must file the no-contact declaration.
- The registrar general of the Vital Statistics Agency must not give a person to whom a no-contact declaration relates a copy of a birth registration or other record naming the person who filed the declaration unless the person applying has signed an undertaking in the prescribed form.
- A person who is named in a no-contact declaration and has signed an undertaking must not:
  - knowingly contact or attempt to contact the person who filed the declaration;
  - procure another person to contact the person who filed the declaration;
  - use information obtained under the *Adoption Act* to intimidate or harass the person who filed the declaration; or
  - procure another person to intimidate or harass, by the use of information obtained under the *Adoption Act*, the person who filed the declaration.
- A person who files a no-contact declaration may file with it a written statement that includes any of the following:
  - the reasons for wishing not to be contacted;
  - in the case of a birth parent, a brief summary of any available information about the medical and social history of the birth parents and their families;
  - any other relevant non-identifying information.
- When a person to whom a no-contact declaration relates is given a copy of a birth registration, the registrar general of the Vital Statistics Agency must give the person applying the information that is in any written statement filed with the declaration.
- A person who files a no-contact declaration may cancel the declaration at any time by completing the Rescind a Disclosure Veto or No-Contact Declaration form (VSA 633).
- Unless cancelled, a no-contact declaration is in effect until 2 years after the death of the person who filed the no-contact declaration.

### Making a false statement:

**Under section 86 of the *Adoption Act*, a person must not make a statement that the person knows to be false or misleading in an application, or in connection with an application for a copy of a birth registration, or other record from the Vital Statistics Agency, or for filing a disclosure veto, or no-contact declaration.**

**A person who contravenes this section of the *Act* commits an offence and is liable on conviction to a fine of up to \$5,000.**

Having read and understood the above section of the *Act*,

I, \_\_\_\_\_ do solemnly declare that I wish to  
(PRINT full First, Middle and Current Last/Family Names)

register a NO-CONTACT DECLARATION prohibiting my contact as specified by the *ADOPTION ACT*.

X

\_\_\_\_\_  
Declarant's Signature

\_\_\_\_\_  
Date



# NO-CONTACT DECLARATION AND STATEMENT Pertaining to an Adopted Person or Birth Parent

**PLEASE READ NOTES ON PAGE 4**

INFORMATION ABOUT THE PERSON APPLYING				
Applicant's Personal Health Number (BC Services Card Number)		Applicant born in British Columbia? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Current Last/Family Name		First Name	Middle Name(s)	
Mailing Address		<div style="border: 1px solid black; background-color: #e0e0e0; padding: 5px;">           SHADED AREA FOR OFFICE USE ONLY            APPLICATION FOR SERVICE NUMBER         </div>		
City/Town/Village, Province/State, Country				Postal/Zip Code
Home Phone Number (include area code)				Work Phone Number (include area code)

**I AM:**

**Adopted person** (18 years or older) → Section A only       **Birth parent** (of adopted person 19 years or older) → Section B only

**SECTION A: TO BE COMPLETED BY ADOPTED PERSON AS APPLICANT (Please print)**

Name on birth certificate <u>after</u> adoption Last/Family Name		First Name	Middle Name(s)	Sex
Date of Birth MONTH DAY YEAR	Date of Adoption MONTH DAY YEAR	Approximate Year of Adoption		
Birthplace (City/Town/Village, Province/State, Country)		Place of Adoption (City/Town/Village, Province/State, Country)		
Last/Family Name at Birth of <u>Adoptive</u> Parent 1	First Name	Middle Name(s)	Birthplace of <u>Adoptive</u> Parent 1 (City/Town/Village, Province/State, Country)	
Last/Family Name at Birth of <u>Adoptive</u> Parent 2	First Name	Middle Name(s)	Birthplace of <u>Adoptive</u> Parent 2 (City/Town/Village, Province/State, Country)	
Birth Name (if known)			Birthplace Registration Number (from birth certificate)	

**SECTION B: TO BE COMPLETED BY BIRTH PARENT AS APPLICANT (Please print)**

**I. PARTICULARS OF BIRTH PARENTS (AT TIME OF ADOPTED PERSON'S BIRTH)**

Last/Family Name at Birth of Person Who Gave Birth	First Name	Middle Name(s)	Last/Family Name at Birth of Birth Parent 2	First Name	Middle Name(s)
Date of Birth Month Day Year	Birthplace (City/Town/Village, Province/State, Country)		Date of Birth Month Day Year	Birthplace (City/Town/Village, Province/State, Country)	

**II. PARTICULARS OF ADOPTED PERSON PRIOR TO ADOPTION**

Last/Family Name	First Name	Middle Name(s)	Sex	Date of Birth Month Day Year	Birthplace (City/Town/Village, Province/State, Country)
Date of Adoption Month Day Year	Approximate Year of Adoption				
Name of Adopted Person Following Adoption (if known)					

SIGNATURE OF APPLICANT

Written Signature of Applicant

This information is collected by the Vital Statistics Agency under section 26(c) of the *Freedom of Information and Protection of Privacy Act*, and will be used to fulfill the requirements of the *Vital Statistics Act* for the withholding of adoption information. Should you have any questions about the collection of this personal information, please contact:  
 Manager, Vital Statistics Agency, 250 952-2681, PO Box 9657, Stn Prov Govt, Victoria BC V8W 9P3.

