



HARRISON COUNTY HEALTH DEPARTMENT

266 ATWOOD STREET; CORYDON, INDIANA 47112
 PHONE (812) 738-3237 – FAX (812) 738-4292
 WWW.HARRISONCOUNTYHEALTH.COM

Birth and death records in Indiana are available from **February 1, 1882** to present. No records prior to this date are available from this Health Department.

WARNING: False application, altering, mutilating or counterfeiting Indiana birth certificates is a Class A misdemeanor under IC 16-37-1-12. All applicants must provide at least one form of acceptable identification per IC 16-37-1-8, such as a driver's license, government-issued picture ID, etc. **We have birth certificates for people born in Harrison County ONLY.**

1. Full name at birth (of person whose birth certificate you want): _____		2. Date of birth (of person in Box 1): _____	
First Middle Last			
3. Has this person been adopted? YES _____ NO _____		4. New name after adoption: _____	
6. Full name of father (of person in Box 1): _____		7. Full MAIDEN name of mother (of person in Box 1): _____	
First Middle Last		First Middle Last (Maiden)	
8. Birthplace of father (state): _____		9. Birthplace of mother (state): _____	
10. Are you the person named in Box 1? YES _____ NO _____		11. If not, what is your relationship to that person? _____	
12. Purpose for which record is to be used: (examples: travel, school, retirement, license..)		13. Print <u>your</u> current legal name (because you are the person requesting this record)	
14. Your phone number		15. Your signature	
16. Your street address		17. Your city, state, zip	
Fee is \$5.00 per certified certificate. Number of copies needed: _____		e-mail address (we may need to contact you if you order older records by mail)	

If ordering by mail, please include:

A stamped, self-addressed envelope

Picture ID of person requesting this record

\$5.00 for each birth certificate you want

For office use only:

No.	Book:	Page:	Date:
Clerk:	ID #		Expires: