

Information to apply to alter the register to record a change of sex

Change of sex certificate for persons born in NSW

Births Deaths and Marriages Registration Act 1995

Eligibility

Under Part 5A of the Births, Deaths and Marriages Registration Act 1995 a person whose birth is registered in NSW and who has undergone a sex affirmation procedure can apply to the Registry to record their new sex on their birth certificate.

Your new birth certificate will not be marked in any way to indicate your sex has been changed. If you have changed your name since your birth was first registered, a notation stating that your birth was 'previously registered in another name' will appear on the new certificate. Access to your old birth certificate is restricted by legislation once the change of sex has been recorded.

Instructions

1 Complete all sections

Use black ink and write in **BLOCK** letters.

All corrections must be initialled. Do not use white out.

2 Identification documents (ID)

- You must provide at least three (3) forms of ID, including photo ID. Overseas documents must be translated into English by a NAATI accredited translator. The Registry will not accept faxed applications or faxed identification documents.
- All photocopies of ID must be certified by an authorised witness as being true and correct copies of the originals. The following persons can certify your ID.
 - Justice of the Peace
 - Notary Public
 - Legal Practitioner (holding a current practising certificate)
 - A person authorised to administer an oath under section 26 of the Oaths Act 1900.

3 Application and Statutory Declarations

- Complete and submit all sections along with appropriate ID and payment. Incomplete applications may cause delays and be returned, or refused.
 - One (1) Application to record a change of sex,
 - Two (2) supporting statutory declarations to register a change of sex from either an registered medical practitioner, or a person authorised to practice medicine by law of a jurisdiction outside of Australia.
- An **authorised witness** who takes and receives a statutory declaration must confirm your identity before the declaration is made. If you have not known the authorised witness for at least 12 months, the witness must sight one identity document (original or certified copy), such as an Australian passport, Australian birth certificate, Australian or foreign driver's licence, an Australian citizenship certificate, a pension card issued by Centrelink, or an Australian Medicare card.
- A copy of a document may be certified as a true copy of the original only by a person (other than the authorised witness) authorised to take and receive statutory declarations.

4 Payment details

- The fee for registering a change of sex includes the issue of a new birth certificate.
- If you have not previously changed your name on your birth registration and wish to do so, you will also need to complete an application for register a change of name. Please contact the Registry or go to our website for the appropriate form.

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How we deal with your information

Privacy

The Registry is responsible for the administration of legislation including the *Births, Deaths and Marriages Registration Act 1995* and the *Relationship Register Act 2010* and the regulations made under those Acts. We collect information under those Acts in order to register NSW life events accurately and securely in perpetuity, ensuring their integrity and confidentiality.

The Register is a permanent historical record and part of the civil records of NSW. It is not available for public scrutiny. Information held in the Register is used to issue certificates in accordance with our Access Policy and can be used for a range of other purposes including statistical analysis, medical research, community planning and law enforcement.

When you complete this form, we use the information that you provide to us to respond to your request (which may include determining your eligibility and making a decision on your application) and to prevent fraud. We may disclose your personal information to a third party to verify that the information that you have provided to us is correct.

For more information about how we handle personal information, including who we may disclose it to, please read our Privacy Collection Notice, available at <https://www.nsw.gov.au/births-deaths-marriages/about-us/privacy-collection-notice>.

Fees and processing times

Please call 13 77 88 for current fees and processing times or check our website at www.nsw.gov.au/bdm

Enquiries

Phone: 13 77 88 (Service NSW Mon-Fri 7am-7pm)

Hearing/Speech impaired

- TTY/Voice Call 133 677
- Speak and Listen 1300 555 727

Translating and Interpreting Service

- TIS National 131 450

www.nsw.gov.au/bdm

How to lodge this application

Please post your application with your identification and payment to:

NSW Registry of Births Deaths & Marriages
GPO Box 30
Sydney NSW 2001

OR lodge your application in person at a Service NSW service centre www.service.nsw.gov.au

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Identification documents

To protect your privacy, the Registry requires proof of your identity.

- Provide at least three (3) forms of identification, **one of each from categories 1, 2 and 3 or 4.**
- One (1) document must include your current residential address.
- If you are unable to provide identification from categories 1 and 2, you must still provide at least three (3) forms of identification. At least two (2) of these must be from category 3.
- Photocopies of identification must be certified by an authorised witness* (see below) as true copies of the original.

Category 1	Category 3
<ul style="list-style-type: none"> • A NSW birth certificate 	<ul style="list-style-type: none"> • Medicare card • Centrelink or Department of Veterans Affairs card • Security guard/Crowd control licence • Tertiary education institution ID card
Category 2	Category 4
<ul style="list-style-type: none"> • Australian driver's licence • Australian passport • Firearms licence • Foreign passport • Photo ID card from motor vehicle or driver licensing authorities 	<ul style="list-style-type: none"> • Utility account • with current NSW residential address issued within last 3 months • Utility account dated more than 12 months prior to this application • Rates notice • Lease agreement <p>A Post office box is not acceptable evidence of residential address</p>

Authorised witness

All photocopies of ID must be certified by an authorised witness as being true and correct copies of the originals. The following persons can certify your ID.

- Justice of the Peace
- Notary Public
- Legal Practitioner (holding a current practising certificate)
- A person authorised to administer an oath under Section 26 of the *Oaths Act 1900*.

Checklist

- Application to register change of sex.
- Two medical practitioners completed supporting statutory declarations.
- Copies of certified ID attached.
- Payment details supplied.

Once you have read and understood the information above, proceed to the next page to complete your application.

I Declare

- The information I have provided is true and correct.
- I have read and understand all the information and instructions in this document including the information about privacy.

Application to record a change of sex (applicant)

Under Section 32(b) of the Births, Deaths and Marriages Registration Act 1995 for persons born in the state of NSW

Office Use Only
COS No.

Warning

If you knowingly provide false information in this application, you may be guilty of an offence under Section 57 of the *Births, Deaths and Marriages Registration Act 1995*.

Section 57 – False representation: A person who makes a representation in an application, notice or document under this Act or in response to a notice under Section 44 of this Act (Registrar’s powers of inquiry), knowing the representation to be false or misleading in a material particular, is guilty of an offence.

It is also an offence under Part 5A of the *Crimes Act 1900* to provide false or misleading information or documents.

Maximum penalty: 100 penalty units or 2 years imprisonment, or both.

Details of the person completing this application

Current name

Family name

First given name

Other given name(s)

Name at birth

Family name

First given name

Other given name(s)

Residential address

Address Line 1

Address Line 2

Suburb/Town/City

State/Territory

Postcode

Country

Postal address

Address Line 1

Address Line 2

Suburb/Town/City

State/Territory

Postcode

Country

Contact details

Contact number

Email address

Application to record a change of sex (applicant)

Continued

Sex at birth was recorded as Male Female Other
(if 'Other' please specify)

Date of birth

Place of birth

Suburb/Town/City

State/Territory

Postcode

Country

Your parents' details

Parent One details

Relationship to applicant Mother Parent

Family name

Family name at birth

First given name

Other given name(s)

Parent Two details

Relationship to applicant Father Parent Mother

Family name

Family name at birth

First given name

Other given name(s)

I have since undergone a sex affirmation procedure for which I tender medical verification by 2 registered medical practitioners with my application.

I now apply to the Registrar to have my change of sex registered in accordance with Section 32(B), showing my sex registered on my new Birth Certificate as;

Male Female Non-specific

I understand it is a punishable offence to give false information in this application.

I understand that the NSW Registry of Births Deaths & Marriages may confirm or verify the validity of any document provided with this application to establish my identity and eligibility for this change of sex to be registered.

I have read and understand all the information and instructions in this document including the information about privacy.

Has a change of name application been lodged with this change of sex application?

Yes No

Signature
of applicant

Date signed

Supporting statutory declaration (1)

change of sex – verify sex affirmation procedure

Under 32B of the Births Deaths and Marriages Registration Act, 1995
for a person born in the state of NSW

False representation

If you knowingly provide false information in this application, you may be guilty of an offence under Section 57 of the *Births, Deaths and Marriages Registration Act 1995*.

Section 57 – False representation: A person who makes a representation in an application, notice or document under this Act or in response to a notice under Section 44 of this Act (Registrar’s powers of inquiry), knowing the representation to be false or misleading in a material particular, is guilty of an offence.

Maximum penalty: 100 penalty units or 2 years imprisonment, or both.

Details of medical practitioner completing this declaration

I,

Family name

First given name

Other given name(s)

of

Practising address of medical practitioner

Company name

Address Line 1

Address Line 2

Suburb/Town/City

State/Territory

Postcode

Country

Postal address of medical practitioner

Address Line 1

Address Line 2

Suburb/Town/City

State/Territory

Postcode

Country

Contact details

Contact number

Email address

Supporting statutory declaration (1) change of sex – verify sex affirmation procedure

Continued

Declare

I am registered in Australia as a medical practitioner and my Medicare provider number is

[Medicare provider number]

Or

I am a registered medical practitioner in

[Country name]

and my registration number is

[Registration number]

I have examined or performed sex affirmation surgery on

[current full name of applicant]

whose identity I have confirmed from documents produced to me.

I confirm this person has undergone sex affirmation surgery as defined in Section 32A, of the *Births Deaths and Marriages Registrations Act 1995*, sex affirmation surgery is a surgical procedure involving the alteration of a person's reproductive organs carried out:

- a. for the purpose of assisting a person to be considered to be a member of the opposite sex; or
- b. to correct or eliminate ambiguities relating to the sex of the person.

I support

[current full name of applicant]

to register a change of sex in accordance with Section 32D of the *Births Deaths & Marriages Registrations Act 1995*, showing the sex now to be Male Female Non-specific

This is a confidential disclosure for the exclusive use of the NSW Registry of Births Deaths & Marriages.

I make this solemn declaration conscientiously believing the same to be true and correct and by virtue of the provisions of the *Oaths Act 1900*.

I certify that I have read and understood the declaration above, by signing in the presence of an authorised witness on the next page.

Supporting statutory declaration (1)

change of sex – verify sex affirmation procedure

Continued

Declarant (medical practitioner)

[An authorised witness must witness your signature, and supply other details below]

I certify that I have read and understood the declaration on the previous pages.

Signature of
medical practitioner

Authorised witness

An authorised witness who takes and receives a statutory declaration must confirm your identity before the declaration is made. If you have not known the authorised witness for at least 12 months, the authorised witness will need to sight one identity document (original or certified copy). [see page 1.]

I certify the following matters concerning the making of this statutory declaration by the person who made it:

[*please cross out any text that does not apply]

- *I saw the face of the person OR *I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering, and
- *I have known the person for at least 12 months OR *I have not known the person for at least 12 months, but I have confirmed the person's identity using an identification document and the document I relied on was:

[describe identification document relied on – refer to page 1 "Statutory Declaration"]

Declared at

In the state of _____ on _____

Before me _____ JP No. _____
(signature of authorised witness)

Full name of authorised witness *(block letters)*

Contact phone number of authorised witness

Email of authorised witness

Address of authorised witness

Address Line 1

Address Line 2

Suburb/Town/City

State/Territory

Postcode

Country

Tick correct title of authorised witness:

Justice of the Peace

Legal Practitioner *(with current practising certificate)*

Notary Public

A person authorised to administer an oath under Section 26 of the *Oaths Act 1900*

Supporting statutory declaration (2) change of sex – verify sex affirmation procedure

Under 32B of the Births Deaths and Marriages Registration Act, 1995
for a person born in the state of NSW

False representation

If you knowingly provide false information in this application, you may be guilty of an offence under Section 57 of the Births, Deaths and Marriages Registration Act 1995.

Section 57 – False representation: A person who makes a representation in an application, notice or document under this Act or in response to a notice under Section 44 of this Act (Registrar's powers of inquiry), knowing the representation to be false or misleading in a material particular, is guilty of an offence.

Maximum penalty: 100 penalty units or 2 years imprisonment, or both.

Details of medical practitioner completing this declaration

I,

Family name

First given name

Other given name(s)

of

Practising address of medical practitioner

Company name

Address Line 1

Address Line 2

Suburb/Town/City

State/Territory

Postcode

Country

Postal address of medical practitioner

Address Line 1

Address Line 2

Suburb/Town/City

State/Territory

Postcode

Country

Contact details

Contact number

Email address

Supporting statutory declaration (2) change of sex – verify sex affirmation procedure

Continued

Declare

I am registered in Australia as a medical practitioner and my Medicare provider number is

[Medicare provider number]

Or

I am a registered medical practitioner in

[Country name]

and my registration number is

[Registration number]

I have examined or performed sex affirmation surgery on

[current full name of applicant]

whose identity I have confirmed from documents produced to me.

I confirm this person has undergone sex affirmation surgery as defined in Section 32A, of the *Births Deaths and Marriages Registrations Act 1995*, sex affirmation surgery is a surgical procedure involving the alteration of a person's reproductive organs carried out: a. for the purpose of assisting a person to be considered to be a member of the opposite sex; or b. to correct or eliminate ambiguities relating to the sex of the person.

I support

[current full name of applicant]

to register a change of sex in accordance with Section 32D of the *Births Deaths & Marriages Registrations Act 1995*, showing the sex now to be Male Female Non-specific

This is a confidential disclosure for the exclusive use of the NSW Registry of Births Deaths & Marriages.

I make this solemn declaration conscientiously believing the same to be true and correct and by virtue of the provisions of the *Oaths Act 1900*.

I certify that I have read and understood the declaration above, by signing in the presence of an authorised witness on the next page.

Supporting statutory declaration (2)

change of sex – verify sex affirmation procedure

Continued

Declarant (medical practitioner)

[An authorised witness must witness your signature, and supply other details below]

I certify that I have read and understood the declaration on the previous pages.

Signature of
medical practitioner

Authorised witness

An authorised witness who takes and receives a statutory declaration must confirm your identity before the declaration is made. If you have not known the authorised witness for at least 12 months, the authorised witness will need to sight one identity document (original or certified copy). [see page 1.]

I certify the following matters concerning the making of this statutory declaration by the person who made it:

[*please cross out any text that does not apply]

- *I saw the face of the person OR *I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering, and
- *I have known the person for at least 12 months OR *I have not known the person for at least 12 months, but I have confirmed the person's identity using an identification document and the document I relied on was:

[describe identification document relied on – refer to page 1 "Statutory Declaration"]

Declared at

In the state of _____ on _____

Before me _____ JP No. _____
(signature of authorised witness)

Full name of authorised witness *(block letters)*

Contact phone number of authorised witness

Email of authorised witness

Address of authorised witness

Address Line 1

Address Line 2

Suburb/Town/City

State/Territory

Postcode

Country

Tick correct title of authorised witness:

- Justice of the Peace Legal Practitioner *(with current practising certificate)*
 Notary Public A person authorised to administer an oath under Section 26 of the *Oaths Act 1900*

Payment details to record a change of sex

ABN 30 854 211 521
GPO Box 30 Sydney NSW 2001 Tel: 13 77 88



Your certificate will be mailed to you if your application was received by post and will incur a postage and handling fee.

See separate 'Fees for Products and Services' flyer.

Please PRINT clearly in BLACK pen. Start at the left. Please complete all details.

Note: Payment includes recording a change of sex and the purchase of ONE standard birth certificate.
Please specify the quantity you wish to receive

Standard birth certificate (Qty)	International Registered Post
Reason certificate is required (e.g. passport, driver's licence)	Your relationship to the registered person (e.g. self)

Applicant's details (person completing this form). Please provide copies of three forms of current identification with your application.

Family name

First given name

Other given name(s)

Company name
(If applicable)

Company reference number
(If applicable)

Address

Suburb/Town/City

State/Territory

Postcode

Country

Postal address
(if different from above)

Suburb/Town/City

State/Territory

Postcode

Country

Contact number

Email

Signature
of applicant

I declare that the information I have provided is true and correct. I understand that it is an offence under Part 5A of the *Crimes Act 1900* to provide false or misleading information or documents and that it is an offence under the *Births, Deaths and Marriages Registration Act 1995* to make a false or misleading representation in an application, notice or document.

Details of birth certificate required

Date of birth

Present age

Names of registered person

Family name

Family name at birth

First given name

Other given name(s)

Place of birth
(Suburb/Town/City)

Parent 1 details

Family name
(Current)

Family name at birth

First given name

Other given name(s)

Parent 2 details

Family name
(Current)

Family name at birth

First given name

Other given name(s)

Payment details

 (complete this section for mail applications only).

Total Amount \$ Please debit my: AMEX Mastercard Visa OR Enclosed is a cheque*/money order

Card number

Credit card surcharge: 1.4% for AMEX and 0.4% for Mastercard and Visa

Name
of cardholder

Expiry date

Signature
of cardholder

*Cheques payable to the NSW Registry of Births Deaths & Marriages. Personal/company cheques are not accepted for urgent applications.