SCOTTISH STATUTORY INSTRUMENTS

## 1999 No. 104

# **REGISTRATION OF BIRTHS, DEATHS, MARRIAGES, ETC.**

The Registration of Births, Still-Births, Deaths and Marriages (Prescription of Forms) (Scotland) Amendment Regulations 1999

Made---21st September 1999Coming into force--1st January 2000

The Registrar General, in exercise of the powers conferred upon him by sections 13(1), 18(1), 21(2), 32(1), 54(1)(b) and 56 of the Registration of Births, Deaths and Marriages (Scotland) Act 1965(1) and of all other powers enabling him in that behalf and with the approval of the Scottish Ministers under section 54 of that Act(2), hereby makes the following Regulations:

## Citation, commencement and interpretation

**1.**—(1) These Regulations may be cited as the Registration of Births, Still-Births, Deaths and Marriages (Prescription of Forms) (Scotland) Amendment Regulations 1999 and shall come into force on 1st January 2000.

(2) In these Regulations, "the principal Regulations" means the Registration of Births, Still-Births, Deaths and Marriages (Prescription of Forms) (Scotland) Regulations 1997(**3**).

## Amendment of the principal Regulations

**2.** For the form set out in Schedule 2 to the principal Regulations there shall be substituted the form set out in Schedule 1 to these Regulations.

**3.** For the form set out in Schedule 6 to the principal Regulations there shall be substituted the form set out in Schedule 2 to these Regulations.

 <sup>1965,</sup> c. 49; section 18 was amended by paragraphs 8(2) and (3) of Schedule 1 to the Law Reform (Parent and Child) (Scotland) Act 1986 (c. 9); section 32(1) was amended by the Marriage (Scotland) Act 1977 (c. 15), Schedule 2, paragraph 8; section 56 contains a definition of "prescribed" relevant to the exercise of statutory powers under which these Regulations are made.
 (2) The functions of the Secretary of State were transferred to the Scotlish Ministers by virtue of section 53 of the Scotland Act

<sup>(2)</sup> The functions of the secretary of state were transferred to the section within sters by virtue of section 35 of the section 440 1998 (c. 46).

<sup>(</sup>**3**) S.I.1997/2348, amended by S.I.1998/2285

**4.** For the form set out in Schedule 21 to the principal Regulations there shall be substituted the form set out in Schedule 3 to these Regulations.

**5.** For the form set out in Schedule 22 to the principal Regulations there shall be substituted the form set out in Schedule 4 to these Regulations.

New Register House, Edinburgh 16th September 1999

*J N RANDALL* Registrar General for Scotland

Approved by the Scottish Ministers

St Andrew's House, Edinburgh 21st September 1999

*JIM WALLACE* A member of the Scottish Executive

## SCHEDULE 1

Regulation 2

## (Section 13(1) of the Registration of Births, Deaths and Marriages (Scotland) Act 1965)

STILL-BIRTH Registered in the district of						District No.		Year	Entry No.
1. Forename(s)						1		J,,	2. Sex
Surname(s)	,								
3. When still-b	When still-born					4. Where still-born			
			· · · · · · · · · · · · · · · · · · ·						
<ol> <li>Date and pla parents' mar</li> </ol>						lace			
6. Mother's forename(s) and surname(s)					7. M	lother's maiden	surname		
8. Mother's usual residence (if different from 4. above)									
. Mother's oc	cupation							<u></u>	
0. Father's fore	ename(s) and	l surname(s	5)	<b></b>		<u></u>			
1. Father's occ	upation								
2. Cause or pro			<u> </u>						
I (a)									
								<u> </u>	
п									
Certifying re									
3. Signature of									
4.	Year	Month	n	Day	15.				
When registered									Registrar
6.		-				<u></u>			
7.						<u></u>			· · · · · · · · · · · · · · · · · · ·

## SCHEDULE 2

#### **CERTIFICATE OF STILL-BIRTH**

(Section 21(2) of the Registration of Births, Deaths and Marriages (Scotland) Act 1965)

This certificate must be delivered to the Registrar of Births, Deaths and Marriages when the still-birth is registered. It is not an authority for burial or cremation. See the back of this form for notes about registration of a still-birth

Section 56(1) of the Registration of Births, Deaths and Marriages (Scotland) Act 1965, as amended by section 1(2) of the Still-Birth (Definition) Act 1992, defines "still-born child" as meaning "a child which has issued forth from its mother after the twenty fourth week of pregnancy and which did not at any time after being completely expelled from its mother breathe or show any other signs of life", and provides that the expression "still-birth" shall be construed accordingly.

To the Registrar of Births, Deaths and Marriages

\*I was present at the still-birth of a \*male/female child

{ \* Delete whichever { does not apply

For registration office use

Year .....

RD Number .....

Entry No .....

\*I have examined the body of a \*male/female child which I am informed and believe was still-born

Time of still-birth       Date of still-birth         Place of still-birth		Hour	Minute		Day	Month	Year
Place of still-birth       I         1 hereby certify that the child was not born alive and that, to the best of my knowledge and belief, the cause or probable cause of death, and the estimated duration of pregnancy of the mother were as stated below       Not to be entered in register         I       I       I         Fetal or maternal condition       (a)       pregnancy         Orient causes       (b)       pregnancy         Antecedent causes       (b)       pregnancy         Fetal or maternal conditions, if       (c)       pregnancy         any, giving rise to the above cause, due to       due to       weeks         Fetal are significant conditions of fetus       II       weeks         Other significant conditions of fetus       II       grammes         Please tick the relevant box       Post-Mortenn       prest-Morten         AP       Death occurred before the onset of labour       PM1       Post-Morten         or       (antepartum)       or       Available later         NK       Time of death was unknown       PM3       No post-mortem is being done				Date of still-birth			
I hereby certify that the child was not born alive and that, to the best of my knowledge and belief, the cause or probable cause of death, and the estimated duration of pregnancy of the mother were as stated below          CAUSE OF DEATH (Please print clearly)         I       I         Fetal or maternal conditions, if       (c)         Antecedent causes       (b)       green and the duration of due to         Fetal or maternal conditions, if       (c)       green and the duath         giving rise to the above cause, the underlying condition to be       (d)       green and the death,         Mut or related to the disease or conditions at it       II       II         Other significant conditions of fetus or mother contributing to the death, but not related to the disease or condition causing it       Post-Mortem         Please tick the relevant box       Post-mortem has been done and or (antepartum)       Or Information may	Name of mother						
CAUSE OF DEATH (Please print clearly)         I       I         I       I         Fetal or maternal condition       (a)       I         Directly causing death       due to         Antecedent causes       (b)       grammes         Getal or maternal conditions, if       (c)       weeks         Antecedent causes       (b)       weeks       Weight of fetus if         Antecedent causes       (due to       II       II         Other significant conditions of fetus or mother contributing to the death, but not related to the disease or condition causing it       II       II         Please tick the relevant box Time of Death Or (intrapartum)       Post-Mortem or (intrapartum)       Post-mortem has been done and Information is included above or Available later         PM1       Death occurred during the labour or (intrapartum)       PM2       Post-mortem information may in Available later         NK       Time of death was unknown       PM3       No post-mortem is being done	I hereby certify that the	child was not	born alive and	that, to the best of my know	ledge and belief		
I       I         Fetal or maternal condition       (a)         Directly causing death       (ue to         Antecedent causes       (b)         (ue to       (ue to         Fetal or maternal conditions, if       (c)         (c)       (ue to         Fetal or maternal conditions, if       (c)         (ue to       (ue to         Fetal or maternal conditions, if       (c)         (ue to       (ue to         Stated last       (ue to         II       II         Other significant conditions of fetus       (ue to         or mother contributing to the death,       (ue to         but not related to the disease or       (condition causing it         Please tick the relevant box       Post-Mortem         AP       Death occurred before the onset of labour       PM1         or       (intrapartum)       or         or       (intrapartum)       or       Information may informatin may information may information may informatio					ated below	Not to be	
I       I         Fetal or maternal condition       (a)         Directly causing death       due to         Antecedent causes       (b)         due to       due to         Fetal or maternal conditions, if       (c)         any, giving rise to the above cause,       due to         the underlying condition to be       (d)         stated last       II         Other significant conditions of fetus       II         or mother contributing to the death,       III         but not related to the disease or		CAUSE OF L	EAIN (Fie	ase prini cieariy)			
Directly causing death due to Antecedent causes (b)	Ι			I			
Antecedent causes (b)due to fetal or maternal conditions, if (c)	Fetal or maternal condition	ion (a	)			pregr	ancy
due to         any, giving rise to the above cause, due to         any, giving rise to the above cause, due to         stated last         II         Other significant conditions of fetus or mother contributing to the death, but not related to the disease or condition causing it         Please tick the relevant box         Time of Death         AP       Death occurred before the onset of labour         or       (antepartum)         or       (antepartum)         or       (intrapartum)         or       (intrapartum)         or       Available later         NK       Time of death was unknown         Date       Date	Directly causing death		due to				
due to         any, giving rise to the above cause, due to         any, giving rise to the above cause, due to         stated last         II         Other significant conditions of fetus or mother contributing to the death, but not related to the disease or condition causing it         Please tick the relevant box         Time of Death         AP       Death occurred before the onset of labour or (antepartum)         or       Information is included above         IP       Death occurred during the labour       PM2         or       Available later         NK       Time of death was unknown       PM3         No post-mortem is being done	Antecedent causes	ſh	<b>)</b>				
any, giving rise to the above cause, due to the underlying condition to be (d)		(0	/				
any, giving rise to the above cause, due to the underlying condition to be (d)	Fetal or maternal condition	ions, if (c	)				
the underlying condition to be (d) stated last II Uter significant conditions of fetus or mother contributing to the death, but not related to the disease or please tick the relevant box Time of Death AP Death occurred before the onset of labour or (antepartum) or (intrapartum) or (intrapartum) or (intrapartum) or NK Time of death was unknown Date Date	any, giving rise to the al	ove cause,	due to				
II       II         Other significant conditions of fetus or mother contributing to the death, but not related to the disease or condition causing it       II       II         Please tick the relevant box       grammes         Please tick the relevant box       Post-Mortem         AP       Death occurred before the onset of labour or (antepartum)       PM1       Post-Mortem         IP       Death occurred during the labour or (intrapartum)       PM2       Post-mortem information may have a valiable later         NK       Time of death was unknown       PM3       No post-mortem is being done		to be (d	)				
II       II         Other significant conditions of fetus or mother contributing to the death, but not related to the disease or condition causing it       II         Please tick the relevant box       grammes         Please tick the relevant box       Post-Mortem         AP       Death occurred before the onset of labour       PM1         or       (antepartum)       or       Information is included above         IP       Death occurred during the labour       PM2       Post-mortem information may information may information may information         or       (intrapartum)       or       Available later         NK       Time of death was unknown       PM3       No post-mortem is being done	stated last					Weight of f	etus if
Other significant conditions of fetus	П			Π		known	
but not related to the disease or condition causing it       grammes         Please tick the relevant box       grammes         Time of Death       Post-Mortem         AP       Death occurred before the onset of labour       PM1       Post-mortem has been done and or (antepartum)         or       (antepartum)       or       Information is included above         IP       Death occurred during the labour       PM2       Post-mortem information may I         or       (intrapartum)       or       Available later         NK       Time of death was unknown       PM3       No post-mortem is being done	Other significant conditi	ons of fetus					
condition causing it       grammes         Please tick the relevant box       post-Mortem         Time of Death       Post-Mortem         AP       Death occurred before the onset of labour       PM1         or       (antepartum)       or       Information is included above         IP       Death occurred during the labour       PM2       Post-mortem information may information may information may information         or       (intrapartum)       or       Available later         NK       Time of death was unknown       PM3       No post-mortem is being done         Signature       Date       Date       Date							
Please tick the relevant box       grammes         Time of Death       Post-Mortem         AP       Death occurred before the onset of labour       PM1       Post-mortem has been done and or information is included above         or       (antepartum)       or       Information is included above         IP       Death occurred during the labour       PM2       Post-mortem information may information may information may information may information may information         or       (intrapartum)       or       Available later         NK       Time of death was unknown       PM3       No post-mortem is being done         Signature       Date       Date		ease or					
Please tick the relevant box       Post-Mortem         Time of Death       Post-Mortem         AP       Death occurred before the onset of labour       PM1       Post-mortem has been done and or         or       (antepartum)       or       Information is included above         IP       Death occurred during the labour       PM2       Post-mortem information may logo         or       (intrapartum)       or       Available later         NK       Time of death was unknown       PM3       No post-mortem is being done         Signature       Date       Date       Date	condition causing it					gram	mes
AP       Death occurred before the onset of labour       PM1       Post-mortem has been done and or and or information is included above         or       (antepartum)       or       Information is included above         IP       Death occurred during the labour       PM2       Post-mortem information may be or information may be or information may be or information may be or information         NK       Time of death was unknown       PM3       No post-mortem is being done         Signature       Date       Date       Date	Please tick the relevant	box				8	
or       (antepartum)       or       Information is included above         IP       Death occurred during the labour       PM2       Post-mortem information may log         or       (intrapartum)       or       Available later         NK       Time of death was unknown       PM3       No post-mortem is being done         Signature       Date       Date	Time of Death				Post-N	lortem	
IP       Death occurred during the labour       PM2       Post-mortem information may log or         or       (intrapartum)       or       Available later         NK       Time of death was unknown       PM3       No post-mortem is being done         Signature       Date       Date	AP Death or	curred before	the onset of lab	our PM1	Post-m	ortem has been	done and
or (intrapartum) or Available later NK Time of death was unknown PM3 No post-mortem is being done Signature Date							
NK Time of death was unknown PM3 No post-mortem is being done Signature Date							ion may be
Signature							
	NK Time of	death was unk	nown	PM3	No pos	t-mortem is bei	ng done
	Signature			Date			
Name in BLOCK CAPITALS	Name in BLOCK CAPI	FALS					
Registered medical qualifications or registration number if a registered midwife	Registered medical quali	fications or re-	distration numb	er if a registered midwife			
Official Address	<b>5</b> I		giociacion nume	the is a registered indwire.	••••••		••••••

Regulation 3

FORM 6 F(6) 0000001 The doctor/midwife has given you this form so that you can arrange for the still-birth to be registered. Once the still-birth is registered, the local registrar will keep this form, but can, with the Registrar General's authority, issue extracts of the entry in the register of still-births.

### Who should tell the local registrar about the still-birth

One of the following people must go to the registration office and tell the local registrar about the still-birth:-

- the father, or
- the mother,

or in the case of the death or inability of the father and mother any of the following:-

- a relative of either parent being a relative who has knowledge of the still-birth
- the occupier of the premises in which the child was, to the knowledge of that occupier, still-born,
- a person present at the still-birth

In this context "father" and "parent" do not include a father who is not married to the mother and has not been married to her since the child's conception.

### Where to take the form

In Scotland, a still-birth may be registered:-

- either in the registration district where it takes place,
- or in the registration district where the mother lived (the district of "usual residence").

Usual residence means the parental home and not an address such as a holiday address where the mother might have been staying at the time of the still-birth.

If you need advice about what to do with the form, please telephone any local registrar in Scotland (see 'Registration of Births, Deaths and Marriages' in the telephone book).

## SCHEDULE 3

**SCHEDULE 3** 

Regulation 4

Regulation 4

Form 26



## DECLARATION BY THE MOTHER OF A CHILD

(Section 18(1)(b)(i)(aa) of the Registration of Births, Deaths and Marriages (Scotland) Act 1965)

I
residing at
- Postcode
DO HEREBY SOLEMNLY AND SINCERELY DECLARE that
whose usual address is
Postcode
is the father of the *female/male child named
born to me on
at
Dated this day of
Signature
Signature
Declared before me at
on the
day of
the registration district of

This declaration must be accompanied by a statutory declaration by the person named above as the father acknowledging himself to be the father of the child.

WARNING: A person who gives false information may be found guilty of a criminal offence.

\*delete as applicable

**SCHEDULE 4** 

SCHEDULE 4

Regulation 5

Regulation 5

Form 27



## DECLARATION BY THE FATHER OF A CHILD

(Section 18(1)(c)(i) of the Registration of Births, Deaths and Marriages (Scotland) Act 1965)

I
residing at
Postcode
DO HEREBY SOLEMNLY AND SINCERELY DECLARE that I am the father of
the *female/male child named
and born on
at
to
whose usual address is
Postcode
Dated this day of
Signature
Declared before me at
on the
day of
the registration district of
This declaration must be accompanied by a statutory declaration by the mother stating that the

This declaration must be accompanied by a statutory declaration by the mother stating that th person making the declaration above is the father of the child.

WARNING: A person who gives false information may be found guilty of a criminal offence.

\*delete as applicable

## **EXPLANATORY NOTE**

(This note is not part of the Regulations)

These regulations amend the Registration of Births, Still-Births, Deaths and Marriages (Prescription of Forms) (Scotland) Regulations 1997.

A revised certificate of still-birth is substituted to enable more detail to be provided about the sequence of events leading to death and contains minor drafting amendments (regulation 3). The stillbirth register page is substituted as a consequence of the changes made to the certificate of stillbirth (regulation 2).

A revised declaration by the mother of a child (regulation 4) and declaration by the father of a child (regulation 5) are substituted to remove the reference to the parents not being married to each other