PUTATIVE FATHER REGISTRY - REGISTRATION FORM
STATE OF GEORGIA

USE A SEPARATE FORM FOR EACH CHILD. PRINT OR TYPE ALL INFORMATION.

My name is: _____
first middle last

My current address is: _____
street number, name, apartment number, P.O. box

_____
city state zip code

My date of birth is: _____
month, day, year

My social security number is: _____

I hereby indicate the possibility of paternity of the child described below without acknowledging paternity.

The name of the mother of the child is: _____
first middle last

The mother's social security number is: (if known) _____

The mother's address is: _____
street number, name, apartment number, P.O .box

_____
city state zip code

The child's name is: (if known) _____
first middle last

The child **(select one)** ( ) was born on _____ sex of child _____
month, day, year male or female

_____
OR city state

( ) is estimated to be born in _____
month year

As detailed above, I hereby register on the Putative Father Registry as provided by law. I do so to indicate the possibility of my paternity of the child, but I understand I am not formally acknowledging paternity of this child.

Signature of Registrant: _____ ***Date Signed:*** _____

SEE INFORMATION AND INSTRUCTIONS ON REVERSE

USE A SEPARATE REGISTRATION FORM FOR EACH CHILD

INFORMATION and INSTRUCTIONS

"A man who has engaged in a nonmarital sexual relationship with a woman is deemed to be on notice that a pregnancy and adoption proceeding regarding a child may occur and has the duty to protect his own rights and interests in that child. He is therefore entitled to notice of an adoption proceeding only as provided in this Code section". (Section 19-8-12(a) Official Code of Georgia Annotated)

Putative is defined as "generally regarded", "supposed", or "reputed".

If you need more specific information about the Putative Father Registry, your rights concerning adoption proceedings, or other information regarding Georgia law, please contact your attorney. You may call **(404) 679-4754** if you need general information about registering your name in the Putative Father Registry.

No fee is required for a man to provide information to the Putative Father Registry. No fee is required for the man to correct or change information entered in the Putative Father Registry.

Type or print all information except signatures.

If you are completing this form by printing the information, only use black or dark blue ink. Do not use pencil or any other color ink pen.

Mail the completed form to the following address:

Registry
Vital Records
2600 Skyland Drive, NE
Atlanta, Georgia 30319

You may fax the completed form to: (404) 679-4730.

You may correct or change any of the information you previously provided to the registry. To make a change, mail or fax a letter to the above address including your complete name, social security number, old information as it was originally entered in the registry and the new information as it should be shown in the registry.

Copies of this form may be ordered from Vital Records at the address shown above. Copies of this form may be locally reproduced.