CERTIFICATE OF BIRTH

Registration Office: Form Thor.Ror.19 Part 1

No.

1. The New Born	1.1 Name :		Surname :	1.2 Sex : [ ] Male [ ] Female	1.3 Nationality :	
	1.4 Date of Birth Day/Month/Year		At : hrs.	Corresponding to : [ ] Waxing moon [ ] WaningMoon	Month :	Year :
	1.5 Place of birth: House No., Village No., Alley, Road, Sub-District, District, Province				Country :	
2. Mother	2.1 Name :		Maiden name :	2.2 Age: Years	2.3 Nationality :	
	2.4 Residing at the same place as the new born : [ ]		House No., Village No., Alley, Road, Sub-District, District, Province			
3. Father	3.1 Name :		Surname :	3.2 Age : Years	3.3 Nationality :	
4. Person Notifying Birth	4.1 Name :	Surname :	4.2 Residence: House No., Village No., Alley, Road, Sub-District, District Province			
	4.3 Relationship : [ ]Head of Household, [ ]Father, [ ]Mother, [ ]Officer, [ ]Midwife, [ ]Other				4.4 Signature of notifying person :	
5. Date of notification : Day / Month / Year			6. Date of notifying name changed : Day / Month / Year			
7. Signature of Registrar : - signed - ( ) (Official seal affixed)			8. Signature of Registrar acknowledging name changed : ..... (.....) Registrar			

Certified correct translation