

INSTRUCTION SHEET FOR COMPLETING CERTIFICATE OF NAME

- (1) (YOUR NAME) (2) (YOUR CURRENT ADDRESS)
- (3) (state either MOTHER or FATHER) (4) (state MOTHER'S NAME)
- (5) (state FATHER'S NAME) (6) (DAY e.g. 22)
- (7) (MONTH) (8) (YEAR)
- (9) (ENFIELD) (10) (DAY OF REGISTRATION)
- (11/12) (MONTH and YEAR OF REGISTRATION)
- (13) (FORENAMES ONLY NOT FAMILY NAME)
- (14) (TODAY'S DATE) (15/16) (MONTH AND YEAR)
- (17) (YOUR SIGNATURE)

BIRTHS AND DEATHS REGISTRATION ACT 1953

(Form prescribed by the Registration of Births and Deaths Regulations 1987)

CERTIFICATE OF NAME GIVEN NOT IN BAPTISM

within 12 months after registration of birth

1 of 2
ne (a) 3 of the male child born to 4
5 on the 6 day of 7 8 whose birth was
ed in the register for births for the sub-district of 9
10 day of 11 12 do hereby certify that the said child not having been given a name
sm within twelve months after registration of his birth given the name 13
her*

Witness my hand this 14 day of 15 16
Signature 17

CERTIFICATE OF ENTRY OF NAME

certify that the above name has been entered by me in Entry Number in the register book of births for the
b-district of in the quarter ended

Signed Superintendent Registrar*
Registrar

Date

the 'Father', 'Mother', 'Guardian' or as case may be
out whichever does not apply

(over)