

(Not applicable for births before 27 February 1931)

## **AFFIDAVIT FOR DELAYED REGISTRATION OF BIRTH**

(Either the person himself is 18 years old or older, or father/mother/guardian may accomplish this affidavit)

I,(Name of Afficient)	of legal age, single/married, and with residence and postal
(Name of Affiant) address at	, after having been duly sworn to in accordance with
(Address)	
law, do hereby depose and say:	

 That I am the applicant for the delayed registration of (please underline, as appropriate) my birth / or the birth of \_\_\_\_\_\_.

2.	That	l / he	e / she	was	born					of Birth)	at			(0) 11 1						
3.	That	l / he	e / she	is a	citizeı	n of		(Child	s Date o	of Birth)				(Child	s Plac	ce of Bir	rth) ;			
4.	That	my /	his / h	er pa	arents	are			(Name	e of Father)		e	and			(Nai	me of Mot	ner)		
	(									at _						(144				
	(									d by my						nam	ne is			
	-					(	Name c	of Fath	or)						.,					
5.	That	the	e reas	son	for					registe	ering	my	/	his	/	her	birth	was	due	to
																				;
6.	That	а	сору	of	my	/	his	/	her	birth	certi	ificate	is	s ne	ede	ed f	or th	e pu	rpose	of
																				;

7. () (For the applicant only) That I am married to \_\_\_\_\_\_.
() (For the father/mother/guardian) That I/we am/are the \_\_\_\_\_\_ of the said person. (Relationship to the Child)

AFFIANT

SUBSCRIBED AND SWO	<b>DRN</b> to before me	affiant exhibiting his/her Passport No.		
	issued on		in	
(Passport Number)		(Date Issued)		(Place Issued)
Service No. :				

0011100 110.	•	
Doc. No.	:	
Book No.	:	
Fee Paid	:	
O.R. No.		