

Birth Registration Certificate

Government of [Country/State]

Certificate Number:	<input type="text"/>
Full Name of Child:	<input type="text"/>
Date of Birth:	<input type="text"/>
Place of Birth:	<input type="text"/>
Gender:	<input type="text"/>
Father's Name:	<input type="text"/>
Mother's Name:	<input type="text"/>
Address:	<input type="text"/>
Date of Registration:	<input type="text"/>
Registrar's Name:	<input type="text"/>

Registrar's Signature

Date: