REPUBLIC OF SOUTH AFRICA  
DEPARTMENT OF HOME AFFAIRS  
NOTICE OF BIRTH  
(PERSONS UNDER ONE YEAR)  
[Section 9 of Act No. 51 of 1992: Regulation 5 (1)]

**A. CHILD**

<table>
<thead>
<tr>
<th>Surname</th>
<th>Forenames in full</th>
<th>Date of birth</th>
<th>Gender</th>
<th>Place of birth: City/Town</th>
<th>If yes, Nature of marriage</th>
<th>Are the parents of the child married to each other?</th>
<th>Date of marriage</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Country</th>
<th>Civil</th>
<th>Customary</th>
<th>Religious</th>
</tr>
</thead>
</table>

**B. NATURAL FATHER OF CHILD/PARENT i.t.o. section 5 of the Children's Status Act, 1967**

<table>
<thead>
<tr>
<th>Identity number</th>
<th>Date of birth</th>
<th>Surname</th>
<th>Forenames in full</th>
<th>Place of birth</th>
<th>Citizenship</th>
<th>Permanent residence permit No.</th>
</tr>
</thead>
</table>

**C. NATURAL MOTHER OF CHILD**

<table>
<thead>
<tr>
<th>Identity number</th>
<th>Date of birth</th>
<th>Present surname</th>
<th>Maiden name</th>
<th>Forenames in full</th>
<th>Place of birth</th>
<th>Citizenship</th>
<th>Permanent residence permit No.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Citizenship</th>
<th>Permanent residence permit No.</th>
</tr>
</thead>
</table>

**D. ACKNOWLEDGEMENT OF PATERNITY I.R.O. A CHILD BORN OUT OF WEDLOCK**

I hereby declare that I am the natural father of the above child.  
Mother's permission to the acknowledgement of paternity.

<table>
<thead>
<tr>
<th>Signatures</th>
<th>Initials and surname</th>
<th>Signature</th>
<th>Initials and surname</th>
<th>Signature</th>
</tr>
</thead>
</table>

**E. INFORMANT**

I, (forenames in full and surname) declare that the above information is correct.

<table>
<thead>
<tr>
<th>Identity No.</th>
<th>Date of birth</th>
<th>Contact address</th>
<th>Postal code</th>
<th>Telephone number</th>
<th>Area code</th>
<th>Date</th>
<th>Signature</th>
<th>Relationship to child</th>
</tr>
</thead>
</table>

**F. FOR OFFICIAL USE**

<table>
<thead>
<tr>
<th>Stat</th>
<th>Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Notice approved by:</th>
<th>Date</th>
<th>Initials and surname:</th>
<th>Persal No.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Signature</th>
<th>Office stamp</th>
</tr>
</thead>
</table>


**NOTICE OF BIRTH**

**INFORMATION FOR MEDICAL AND HEALTH USE ONLY**

**FILE No.:**

**DATE:**

Place of birth: Public hospital [ ] Private hospital [ ] Doctor's office [ ] At home [ ] Clinic [ ] Other [ ]

Facility name: ________________________________ Facility code: ________________________________

### MOTHER

Population group: African [ ] Coloured [ ] Indian [ ] White [ ] Other (specify) [ ]

Education (Specify only highest class completed):

<table>
<thead>
<tr>
<th>None</th>
<th>Sub A Gr. 1</th>
<th>Sub B Gr. 2</th>
<th>Std. 1 Gr. 3</th>
<th>Std. 2 Gr. 4</th>
<th>Std. 3 Gr. 5</th>
<th>Std. 4 Gr. 6</th>
<th>Std. 5 Gr. 7</th>
<th>Std. 6 Gr. 8 Form 1</th>
<th>Std. 7 Gr. 9 Form 2 NTC 1</th>
<th>Std. 8 Gr. 10 Form 3 NTC 2</th>
<th>Std. 9 Gr. 11 Form 4 NTC 3</th>
<th>Std. 10 Gr. 12 Form 5</th>
<th>Univ. Tech.</th>
</tr>
</thead>
</table>

Give full details of the kind of work the mother is doing: ____________________________________________

What is the main activity of the mother's firm, institution or private employer? Describe the activity in as much detail as possible: ____________________________________________

### FATHER

Population group: African [ ] Coloured [ ] Indian [ ] White [ ] Other (specify) [ ]

Education (Specify only highest class completed):

<table>
<thead>
<tr>
<th>None</th>
<th>Sub A Gr. 1</th>
<th>Sub B Gr. 2</th>
<th>Std. 1 Gr. 3</th>
<th>Std. 2 Gr. 4</th>
<th>Std. 3 Gr. 5</th>
<th>Std. 4 Gr. 6</th>
<th>Std. 5 Gr. 7</th>
<th>Std. 6 Gr. 8 Form 1</th>
<th>Std. 7 Gr. 9 Form 2 NTC 1</th>
<th>Std. 8 Gr. 10 Form 3 NTC 2</th>
<th>Std. 9 Gr. 11 Form 4 NTC 3</th>
<th>Std. 10 Gr. 12 Form 5</th>
<th>Univ. Tech.</th>
</tr>
</thead>
</table>

Give full details of the kind of work the father is doing: ____________________________________________

What is the main activity of the father's firm, institution or private employer? Describe the activity in as much detail as possible: ____________________________________________

### MATERNAL

Live birth [ ] Now living [ ] Now dead [ ] Date of previous live birth: ____________________________

Antenatal visit: [Y] [N] Clinical estimate of gestation: ____________________________

Newly born birth weight: ____________________________

Mother transferred prior to delivery: [Y] [N]

If yes, enter name of facility transferred from: ____________________________

Apgar score: 1 min: ______, 5 min: ______

Infant transferred? [Y] [N] If yes, enter name of facility transferred from: ____________________________

### SELECTED RISK FACTORS FOR THIS PREGNANCY

(Complete all items)

- Tobacco use during pregnancy: [Y] [N]
- Alcohol use during pregnancy: [Y] [N]
- Average number of cigarettes per day: ____________________________
- Average number of drinks per week: ____________________________
- Weight gained during pregnancy: ____________________________

### CONGENITAL ABNORMALITIES OF NEWBORN

If yes, specify: ____________________________

### METHOD OF DELIVERY (Mark all that apply):

- Vaginal
- Vaginal birth after a previous C-section
- Primary C-section
- Repeat C-section
- Forceps
- Vacuum

### ABNORMAL CONDITIONS OF NEWBORN (All that apply)

- Anaemic (HCT <39HGB <13G/L)
- Neurological birth injury
- Fetal alcohol syndrome
- Hyaline membrane disease
- Seizures
- Meconium aspiration syndrome

Assisted ventilation: <30 min [ ] Assisted >30 min [ ]

Other (specify)： ____________________________