

## New Birth Registration Form

**Please print clearly**

Date \_\_\_\_\_

Surname \_\_\_\_\_ First Name/s \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Address \_\_\_\_\_

Postcode \_\_\_\_\_

**Child's ethnic group (Please tick one)**

British/Mixed British  Irish  Other White background  White & Black Caribbean

White & Black African  White & Black Asian  Other Mixed Background

Indian/ British Indian  Pakistani/British Pakistani  Bangladeshi/British Bangladeshi

Other Asian background  Caribbean  African  Other Black Background  Chinese

Other ethnic group (please give details) \_\_\_\_\_

Full name of Parents / Guardians \_\_\_\_\_

Tel. Number of Parent / Guardian (if different) \_\_\_\_\_

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