



REPUBLIC OF KENYA

THE REGISTRATION OF BIRTHS AND DEATHS ACT

(Cap. 149)

APPLICATION FOR REGISTRATION OF BIRTH OF A CITIZEN OF KENYA OCCURRING ABROAD

The following information concerning the birth must be supplied:-

1.	FULL NAME OF CHILD	Baptismal or given Name (s)	Middle or tribal Surname Name	Surname or Tribal Name of Father of Child	Son Of Daughter of
2.	DATE OF BIRTH	Date of Month :	Month :	Year	3. SEX OF CHILD Male .. 1 Female .. 2
4.	FULL NAME FATHER OF CHILD	Baptismal or given Name (s)	Middle or tribal name	Surname or Tribal Name of his Father	Son of
5.	FULL NAME MOTHER OF CHILD	Baptismal or given Name (s)	Middle or tribal name	Maiden Surname or Tribal Name of her Father	Daughter of
6.	EXACT PLACE AND COUNTRY OF BIRTH				
7.	NORMAL RESIDENCE IN KENYA OF MOTHER				

08. CERTIFICATES

A—Informant

I certify that I am (State relationship to child or capacity in which information given) .....

and that the above information is correct to the best of my knowledge.

Signature ..... Full Name.....

Address ..... Date .....

B.-By member of Kenya Mission abroad.

I am satisfied from evidence produced to me and inquiries which I have made that the above information is correct to the best of my knowledge.

Signature .....

Designation and Address.....

**(Before completing this form please read the notes overleaf)**

Where a person is unable to produce satisfactory documentary evidence the application may still be completed and forwarded to the Principal Civil Registrar who will advise what alternative evidence may be accepted.

When completed this application should be sent to-

THE PRINCIPAL CIVIL REGISTRAR,  
P.O. Box 49 1 79-00 1 00,  
NAIROBI, KENYA.

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GPK (L) 016-5m-1/2005