Birth Certificate Template

**It is certified that --------------------------**

**Given Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_

**Family Name:** \_\_\_\_\_\_\_\_\_\_\_\_

**Mother Name:** \_\_\_\_\_\_\_\_\_\_\_\_

**Father Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: ---------------

Place of Birth: Area, City, State

Sex: Male/Female Weight: -----------------

Height: ----------------------

**Child Description**

**MS Signature** ------------------------------

**Doctor Signature** --------------------------

Issued by: ----------------------------------------------------------------------------------------------------------------------------