REGULATIONS SURVIVING IN TERMS OF
Births, Marriages and Deaths
Registration Act 81 of 1963
section 51(2)

General Regulations
Government Notice 1181 of 1934
(OG 579)
came into force on date of publication: 15 September 1934

The General Regulations were originally made in terms of section 34 and 48 of the Births, Marriages and Deaths Registration Act 17 of 1923, which was repealed by the Births, Marriages and Deaths Registration Act 81 of 1963. Pursuant to section 51(2) of the Births, Marriages and Deaths Registration Act 81 of 1963, the General Regulations are deemed to have been made under that Act.

Please note that in terms of these regulations, 1 British Pound (£1) is equivalent to 2 Namibian Dollars (N$2). Additionally, there are 20 shillings in a pound and there are also 240 pence in a pound of British currency. The abbreviation “s” refers to shillings and the abbreviation “d” refers to pence.

as amended by

Government Notice 873 of 1937 (OG 721)
came into force on date of publication: 1 July 1937

Government Notice 1329 of 1955 (OG 1934)
came into force on date of publication: 9 August 1955

Government Notice 718 of 1956 (OG 2017)
came into force on date of publication: 19 July 1956

Government Notice 415 of 1960 (OG 2257)
came into force on date of publication: 15 June 1960

ARRANGEMENT OF REGULATIONS
[These regulations do not have headings.]

PART I
POWERS AND DUTIES OF A REGISTRAR, A DISTRICT REGISTRAR, AND AN ASSISTANT DISTRICT REGISTRAR

PART II

PART III
INFORMATION TO BE GIVEN RESPECTING BIRTHS AND DEATHS AND DUTIES OF OFFICERS AND OF THE PUBLIC IN RESPECT THERETO

PART IV
TRANSCRIBING FORMS, ETC., INTO REGISTERS AND CORRECTIONS IN, ALTERATIONS OF AND ADDITIONS TO FORMS, REGISTERS, ETC

PART V
REGISTRATION OF THE BIRTHS AND DEATHS OF NATIVES

PART VI
REGISTRATION OF BIRTHS AND DEATHS OCCURRING ON SHIP-BOARD

PART VII

PART VIII
FORMS, CERTIFICATES, NOTICES, AND REGISTERS TO BE USED IN CONNECTION WITH THE REGISTRATION OF BIRTHS, MARRIAGES, AND DEATHS

SCHEDULE

Preliminary

1. In these regulations -

“Act” shall mean the Births, Marriages, and Deaths Registration Act, 1923, or any amendment thereof;

“form” or “form of information” shall mean the form prescribed in the Schedule hereto for the giving of information concerning a birth, still-birth, or death¹, respectively;

“informant” shall mean in relation to any information concerning a birth, still-birth, or death a person upon whom, by sections eleven, twelve, sixteen, eighteen, nineteen, twenty-one, twenty-nine, thirty, thirty-one, thirty-six, or thirty-seven of the Act, a duty of giving such information is cast;

“rural area” shall mean any part of the Union outside an urban area.

Any expression which is used in the Act and to which by sections five, thirty-five, and forty-nine thereof a meaning is assigned shall, when used in these regulations, have the same meaning.

PART I
POWERS AND DUTIES OF A REGISTRAR, A DISTRICT REGISTRAR, AND AN ASSISTANT DISTRICT REGISTRAR

2. Subject to the provisions of the Act the powers and duties of a registrar, district registrar, and assistant district registrar shall be -

A. Registrar -

1. to take charge of and preserve all books, registers, and records of births, marriages, and deaths which occurred prior to the Act in any part of the Union which should be in his custody and of which no record or duplicate is in his custody;

2. to examine and amend in accordance with these regulations any register, return or documentary proof, or order the amendment thereof, and to call for any documentary proof he may deem necessary;

3. to take charge of and preserve all such books, forms, registers, returns and other documents as form part of the records of the registrar’s office;

4. to submit and recommend to the Minister appointments of district registrars and assistant district registrars;

5. to receive and examine accounts for registrations by justices of the peace and others entitled to remuneration for the registration of births and deaths;

6. to receive and deal with applications in terms of sections six, seven, eight, and ten of the Act;

7. to receive and control requisitions for prescribed registers, forms, and documents required by district registrars;

8. to receive and deal with applications for searches and for certified birth, marriage and death certificates or other documentary proofs, and to obtain and furnish such information concerning births, marriages, and deaths as may be required;

9. to cause indexes to be made of all birth, marriage, and death records in his custody;

10. to have the general control and superintendence of the registration of births, marriages and deaths in the Union, and all persons on whom by these regulations or any Act dealing with the registration of births, marriages and deaths any power or duty is imposed or conferred shall, in the exercise of such power or duty, comply with the lawful instructions of the registrar;

B. District Registrar -

1. to fill in the prescribed forms on behalf of persons who verbally give information concerning births, deaths, and still-births occurring in his district;
(2) to receive forms of information accompanied by declarations, if required, verifying the information given therein;

(3) to receive forms of information from assistant district registrars of his district or area, from officers holding inquests or inquiries, from justices of the peace and from police officers;

[regulation 2B(3) substituted by GN 718/1956]

(4) to examine forms of information received and any documents in support thereof and cause any defect therein to be supplied or inaccuracy corrected;

(5) to register forms of information by inserting the date in the space prescribed (“when registered”), signing his name in the space prescribed (“signature of district registrar”) and inserting in the space prescribed the name of his district;

(6) to transcribe from the forms of information into the “births register” and “deaths register”, as the case may be, all the particulars as are prescribed by these registers, to sign the registers weekly and to number such forms consecutively. A fresh series of numbers shall be commenced on the first day of January in every year;

[regulation 2B(6) substituted by GN 718/1956]

(7) [regulation 2B(7) deleted by GN 718/1956]

(8) to prepare indexes for the “births register” and the “deaths register”; 

(9) to supply assistant district registrars, justices of the peace, and police officers in his district with all prescribed books, forms, and documents required by them;

(10) to furnish the public upon application and upon payment of the prescribed fee with birth and death certificates and to carry out any search that may be required;

(11) to receive and forward to the registrar applications made in terms of sections six, seven, eight and ten of the Act;

[The words “when such applications are tendered to him” deleted by GN 718/1956]

(12) to superintend and control, subject to the lawful instructions of the registrar, the registrations of births and deaths in his district and all officers in his district in as far as they may be engaged in carrying out the provisions of the Act and these regulations;

(13) to keep a list of all assistant district registrars in his district, to advise the registrar of all changes in personnel and to submit recommendations for new appointments;

(14) to transmit at the end of each month to the registrar by registered post a package containing all original forms of information of births, still-births, and deaths, together with all certificates and other documents pertaining thereto, and
simultaneously transmit under the same a separate cover an invoice specifying the contents of such package;

(15) to submit to the registrar vouchers for registration work performed by such of his assistants (including justices of the peace) as are entitled to payment in respect thereof.

[The word “half-yearly” deleted by GN 718/1956]

C. Assistant District Registrars -

(1) to fill in the prescribed forms on behalf of persons who give verbal information of births, deaths, and stillbirths;

(2) to receive forms of information, accompanied by declarations, if required, verifying the information given;

(3) to receive forms of information from officers holding inquests or inquiries, or from justices of the peace or police officers;

(4) to complete forms of information by inserting the date of receipt and the name of the place and by signing his name in the allotted space;

[regulation 2C(4) substituted by GN 718/1956]

(5) [regulation 2C(5) deleted by GN 718/1956]

(6) to receive and forward to the registrar applications made in terms of sections six, seven, eight and ten of the Act;

[regulation 2C(6) amended by GN 718/1956]

(7) to transmit to the district registrar of his district weekly, if there be suitable postal or other communication, or, if not, by every available means, all forms of information, together with any medical certificates and other documents relating thereto.

D. General -

(1) Every district registrar and assistant district registrar shall ascertain and thoroughly acquaint himself with the boundaries of the district or portion of the district for which he has been appointed and with the boundaries of all urban areas in such district or portion of a district.

(2) Every district registrar, assistant district registrar and every other person to whom duties are assigned by the provisions of the Act or of these regulations shall thoroughly acquaint himself with such provisions and with every particular respecting his duties as therein set forth; he shall further acquaint himself with the forms with which he is supplied and their prescribed uses.
(3) Every district registrar, assistant district registrar, justice of the peace or police officer, entrusted with registration work under the Act or these regulations, shall keep himself supplied with such books, forms and documents as may be required for the carrying out of his powers and duties in connection with such registration work.

(4) Every district registrar or assistant district registrar who has the use of a safe shall keep all his books and completed documents and forms therein.

(5) All books, registers and other records of births and deaths in the custody of any district registrar or assistant district registrar, other than those which he may be required to forward to the registrar in terms of paragraph 6 of portion D of this regulation, shall remain in the custody of and be carefully preserved by such district registrar or assistant district registrar (as the case may be).

(6) All books, registers and records of births and deaths which may be in the custody of any person in any district and which have to be placed in the custody of the registrar in terms of this regulation shall be transmitted by the district registrar to the office of the registrar.

[The words “of the Province to which they relate” deleted by GN 718/1956]

PART II

3. (1) All the particulars relating to a birth, still-birth or death required to be inserted on the relevant form prescribed in the Schedule hereto shall be furnished by the informant.

(2) Subject to the provisions of section nine of the Act, particulars shall similarly be given in the case of an illegitimate birth.

(3) If the birth of a person has been registered as illegitimate and application is made for the re-registration of the birth in terms of the provisions of section ten of the Act, the registrar may call for such proof in regard to the birth as he may deem necessary. The registrar shall, if satisfied with the evidence produced, order that the original entry be cancelled and that the birth be registered as legitimate. No reference whatsoever to the previous registration shall be made on the new form.

(4) In case it is found that the same birth, still-birth or death has been registered twice, the district registrar concerned shall forthwith, after comparing the two entries, cancel the second entry, or, if the first entry is found to be incorrect, cancel the first entry of the event and make a note referring the one entry to the other.

PART III

INFORMATION TO BE GIVEN RESPECTING BIRTHS AND DEATHS AND DUTIES OF OFFICERS AND OF THE PUBLIC IN RESPECT THEREETO

4. The prescribed information concerning any birth, stillbirth or death shall be given by the informant to the district registrar or assistant district registrar, if such birth, stillbirth or death occurred within an urban area, or to the district registrar, assistant district registrar or any justice of the peace or police officer, if such birth, still-birth, or death occurred in a rural area, by verbal communication or by transmitting by hand or prepaid post the prescribed form of
information duly filled in. If such information is given by transmitting the prescribed form as aforesaid, such form shall be signed by the informant in the presence of a justice of the peace, commissioner of oaths or police officer, who shall also sign the form in the allotted space.

5. If a woman be delivered of more than one child at one birth, the information concerning the birth of each child shall appear on a separate form and the exact time or hour (if known) of each birth recorded.

6. (1) Particulars regarding still-births shall not be entered in any register but the forms of information shall be forwarded to the Registrar monthly. Certificates of still-births shall be issued only by the Registrar.

   [paragraph 6(1) substituted by GN 718/1956]

   (2) If the child was born alive, even though not viable, but died immediately after its birth, both a birth information form and a death information form shall be completed and both events shall be registered in the usual way.

7. When an inquest or other inquiry into the cause of the death of any person is held, the person holding such inquest or inquiry shall in terms of section twelve of the Act transmit to the district registrar the form prescribed in the Schedule hereto (Form B. M. D. 2) in which the following particulars in regard to the cause of death must be given -

   (a) In the case of a death from disease - the nature of the disease, so far as ascertainable, and, if a medical practitioner is a witness, in the words of such medical practitioner.

   (b) In the case of a death from violent -

      (i) whether the injury causing death was homicidal suicidal or accidental; and

      (ii) nature of the injuries; and

      (iii) the means whereby or instrument wherewith the injury was inflicted and the special circumstances, if any, under which it was sustained (e.g. if a death be caused by machinery, the kind of machine shall be stated; if by burns or scalds, the circumstances and manner in which sustained; if by poison, the name of the poison; if by drowning ‘whether the drowning occurred while battling, boating, or crossing a river or stream -or under what other circumstances); and

      (iv) what time elapsed between the receipt of the injury and death; provided, however, that where the body of a person who has so died has not been recovered, only such particulars as are ascertainable shall be given and the person holding the inquest or inquiry shall add to such particulars the words “Body not recovered” and shall attach to the prescribed form (B. M. D. 2) a certified copy, of the proceedings at the inquest or inquiry. These documents shall be forwarded by the district registrar to the registrar, who may then, in his discretion, authorise the registration of the death.

8. The person in charge of any hospital, maternity home, nursing home, orphanage or similar institution shall when called upon to do so by the district registrar of the district or area
in which such institution is situated, furnish a weekly return of all births and deaths occurring in such institution. Such a return shall show -

(a) in the case of a birth, the date thereof and the name and address of the mother;

(b) in the case of a death, the date thereof and the name of the deceased.

9. The custodian or person having the charge or control of any burial place shall enter in the “burial register” prescribed by section 13(1) of the Act, as amended by section 8 of the Births, Marriages and Deaths Registration Amendment Act, 1955 (Act No. 46 of 1955), in addition to any other particulars which may be required by any authority, the full names and surname of the deceased, his sex, last known address, race, date of death, date of burial, cause of death (as far as ascertained), the date and place of issue of burial order and if no burial order is produced the name and address of the clergyman or undertaker.

[paragraph 9 substituted by GN 718/1956]

10. Every birth, still-birth or death shall be registered in the district in which it occurred and any person whose duty it is to give information concerning a birth, still-birth or death who, before such birth, still-birth or death is registered, removes out of the district in which the birth, still-birth or death occurred into another district, shall within the time prescribed by the Act give information of such birth, still-birth or death to the district registrar or assistant district registrar into whose district he has removed. Such district or assistant district registrar shall sign and date the form of information and transmit it to the district registrar of the district in which such birth, still-birth or death occurred.

11. (1) Every entry made under these regulations on any form, register or other document shall be written out without abbreviations and may be typewritten or written by hand in good “black” ink, except in the case of birth, marriage and death certificates which shall not be typewritten but shall be written by hand.

[paragraph 11(1) substituted by GN 718/1956]

(2) The signature or mark of an informant shall be given by the informant only, and nobody, except a person holding an inquest or inquiry as referred to by section twelve of the Act, shall sign a form in the double capacity of informant and district registrar, assistant district registrar, justice of the peace or police officer.

(3) The signature of the informant giving verbal information at the office of the district registrar or assistant district registrar shall be witnessed by the district registrar, assistant district registrar or by the person acting as clerk to the district registrar or assistant district registrar.

(4) Every district registrar, assistant district registrar, justice of the peace or police officer to whom a form of information is submitted or by whom or in whose presence a form of information is completed or signed, shall in every case endeavour to obtain the usual signature of the informant, even though in foreign script (Hebrew, Arabic, etc.). A signature, however indifferently written is preferable to a mark.

(5) When the signature is in foreign script or is so indifferently written that it cannot be read with certainty, the name represented by such signature shall be written in pencil underneath or above such signature by the officer who fills in the form.

12.
PART IV

TRANSCRIBING FORMS, ETC., INTO REGISTERS AND CORRECTIONS IN,
ALTERATIONS OF AND ADDITIONS TO FORMS, REGISTERS, ETC

13. (1) All such information as is prescribed by the “births register” or “deaths register” shall be transcribed into the relevant register and entries shall be made in the order of the dates of registration.

(2) (a) An entry in English or Afrikaans shall not be translated but shall be transcribed in the language which appears on the form or other document.

(b) The parent or guardian of a person, if he is under 21 years of age, or he himself, if he is 21 years of age or over, may apply to the registrar for the substitution of the original form of information of his birth by a form in either English or Afrikaans and the registrar on receipt of the prescribed fee and after having satisfied himself that the information contained in the fresh form corresponds with that of the original form, shall cancel the original form, attach the fresh form thereto, and instruct the district registrar to amend the relevant entry in his “births register” and thereafter certificates shall be issued in the language of the fresh form only.

(3) Palpable errors and omissions except those mentioned in paragraph (4) of this regulation, occasioned by a want of due care and discovered before the forms have been forwarded to the registrar, may be amended or completed by the district registrar, who shall initial and date such amendments or additions on the form and in the register. Such errors, if discovered by the registrar after the forms have been received by him, shall be corrected by the district registrar in like manner when instructed thereto by the registrar.

(4) If an error or omission has been made in any form or register -

in the case of a birth as regards -

(a) the names of the child or of the parents;

(b) the sex of the child;

(c) the race of the parents;

(d) the date of birth;

or, in the case of a death as regards -

(a) the names of the deceased;

(b) the sex of the deceased;

(c) the race of the deceased;
(d) the age of the deceased;

(e) the status of the deceased;

(f) the date of death;

such form or register shall be amended or completed in the following manner -

If the form is still in the custody of the district registrar, the amendment or addition shall be initialled and dated by the informant and the district registrar, or, if the informant cannot appear in person he shall give his consent in writing, in which event the district registrar shall initial the amendment or addition made and attach the written consent to the form. If such an error or omission is discovered after the form has left the district registrar’s custody, the registrar may make or order such amendment or addition to be made as he may deem necessary and may direct the manner in which it is to be made.

(5) If an error or omission has been made in any marriage register, the registrar shall have power to call for the production of such documentary proof as he may deem necessary. If, after production of such documentary proof and after such inquiry as the registrar may deem necessary, the registrar is satisfied that an amendment, correction, alteration, or insertion in the marriage register is justified, he may direct the marriage officer, in whose custody the original register is kept, to make an entry on such original register reflecting the amendment, correction, alteration, or insertion and the marriage officer shall forthwith comply with the directions of the registrar.

[paragraph 13(5) substituted by GN 718/1956]

14. (1) Before the district registrar transcribes the forms into his register, he shall carefully scrutinize and amend such forms. All forms which cannot be completed forthwith in terms of paragraphs (3) and (4) of regulation No. 13 shall be held back by him for a maximum period of one month. If after the expiry of that period it is still found impossible to obtain the additional particulars required to complete the prescribed information, he shall register the form and forward it to the registrar and shall enter the further particulars when obtained into his register in the manner prescribed in the proceeding regulation and transmit such additional particulars to the registrar for completion of the form.

[paragraph 14(1) amended by GN 718/1956]

(2) In no case whatever shall an error be corrected by an erasure or by over-writing, and no mark or accidental blot shall be removed from a form by erasure with a knife or by other means. All errors shall be amended by drawing a line in ink through any erroneous words, letters, or figures and by inserting above them the correct words, letters, or figures.

15. (1) No removal order shall be granted in terms of section twenty-seven of the Act unless and until the death of the deceased whose body it is desired to remove has been registered.

Any person who removes or causes the removal of a body from the urban area in which deceased died, unless he is in the possession of the prescribed removal order, shall be guilty of an offence.
(2) Before a magistrate or officer in charge of a police station issues an order in terms of section fifteen of the Act, authorizing burial in his district of the body of a person who has died outside that district, he shall satisfy himself that the death was duly registered in the district where the person, whose body it is desired to bury, died. The removal order mentioned in the preceding paragraph may be considered satisfactory proof of such registration.

PART V

REGISTRATION OF THE BIRTHS AND DEATHS OF NATIVES

16. The registration of the births, still-births, and deaths, of natives shall be compulsory in all urban areas, and all regulations dealing with such registration in such areas shall apply, provided, however, that in the case of the death of any native who has not been attended during his last illness by a medical practitioner, the district registrar, assistant district registrar, or police officer (as the case may be) to whom the information with regard to the death is given shall, if no inquest or other proceeding has been or is being instituted, make such inquiry into the cause of death as he shall deem necessary, and, if satisfied that the death was due to natural causes, shall give, without fee or reward, to the person giving the information an order under his hand authorizing burial, but if he is not so satisfied, he shall forthwith report to the magistrate such facts concerning the death as are known to him.

[The words “in such area” deleted by GN 718/1956]

PART VI

REGISTRATION OF BIRTHS AND DEATHS OCCURRING ON SHIP-BOARD

17. (1) When the certified copy of an entry in the ship's log is received by the district registrar in terms of sections thirty-six or thirty-seven of the Act, he shall forthwith forward this to the registrar, after having entered the particulars in a separate register kept by him for the purpose as prescribed in the schedule hereto, but no certified copies of such entries shall be issued by the district registrar.

(2) When the parents, in the case of a birth, or the relatives, in the case of a death, register a birth or death in terms of the aforementioned sections, the district registrar shall register the event in the usual manner and shall make a note thereof in the remarks column of the monthly invoice.

(3) The registrar shall keep a record of all such births or deaths, and all applications: for certified copies of the entries mentioned in paragraph (1) of this regulation shall be referred to him.

PART VII

18. (a) The fees are -

<table>
<thead>
<tr>
<th></th>
<th>£</th>
<th>s.</th>
<th>d.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) For an abridged birth, marriage or death certificate</td>
<td>0</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>(2) For a full birth, marriage or death certificate</td>
<td>0</td>
<td>10</td>
<td>0</td>
</tr>
<tr>
<td>(3) For a copy of any documentary proof</td>
<td>0</td>
<td>2</td>
<td>6</td>
</tr>
</tbody>
</table>

(Provided that no such copy shall be issued unless a certificate in respect of the register to which it is attached is issued at the same time.)
For the searching of a register per calendar year or part thereof and per district: 2½d.

(Provided that search fees shall not be payable if the registration of the event is traced in the register for the calendar year for the district furnished by the applicant, or in the register for the preceding or ensuing calendar year for the said district.)

and

(a) For the alteration of a christian name or surname or the amendment of the spelling of a christian name or surname in a marriage or death register

(b) For any other amendment in a marriage or death register

For the alteration of a christian name or surname or the amendment of the spelling of a christian name or surname in a birth register

For the noting of an alteration of surname or amendment in the spelling of a surname in a birth register

For the alteration of a christian name in a birth register in terms of section seven of the Act

For the late-registration of a birth or death in terms of section six of the Act

For the re-registration of a birth in terms of section ten of the Act

For the inscription of a christian name in terms of section eight of the Act

For any amendment in a birth register not mentioned in the preceding subparagraphs

For the noting of an adoption in terms of section seventy-eight of the Children’s Act, 1937

For confirming the particulars on a birth, marriage or death certificate

For the substitution of a form of information of a birth or death by another in either English of Afrikaans

(b) Full certificates shall be issued only by the Registrar-General and shall be obtainable on application and on payment of the prescribed fee provided that a full birth certificate shall not be issued unless the issue of the certificate is approved by the Minister or an officer authorised thereto by him.

(c) For the purpose of item (7) the term “alteration” shall include the deletion and addition of christian name or christian names as also the amendment in the spelling of a christian name or Christian names.

19. Certificates may be issued free of charge to Government Departments of the Union or of foreign countries if such certificates are required for official purposes and no search fees shall be charged in regard thereto. Such certificates shall be issued only by the Registrar-General.

20. PART VIII

FORMS, CERTIFICATES, NOTICES, AND REGISTERS TO BE USED IN CONNECTION WITH THE REGISTRATION OF BIRTHS, MARRIAGES, AND DEATHS
21. The forms, certificates, notices, and registers to be used in connection with the registration of births, marriages, and deaths shall be those set forth in the schedule hereto, namely -

(1) For giving information concerning a birth or stillbirth - Form B. M. D. 1.

(2) For the “Births Register” Form B. M. D. 1A.

(3)

(4)

(5) For giving information concerning a death - Form B. M. D. 2.

(6) For the “Deaths Register” - Form B. M. D. 2A.

(7)

(8) For the “Original Marriage Register” - Form B. M. D. 3.

(9) For the “Duplicate Original Marriage Register” - Form B. M. D. 3A.

(10) For the “Special Marriage License” - Form B. M, D, 1.

(11) (a) For an abridged birth certificate -
     Form B.M.D. 5(a).

     (b) For a full birth certificate -
         Form B.M.D. 5(b).

(12) (a) For an abridged death certificate -
     Form B.M.D. 6(a).

     (b) For a full death certificate -
         Form B.M.D. 6(b).

(13) (a) For an abridged marriage certificate -
     Form B.M.D. 7(a).

     (b) For a full marriage certificate -
         Form B.M.D. 7(b).

[subparagraph (11), (12) and (13) substituted by GN 1329/1955]

(14) For a medical certificate of the cause of death - Form B. M. D. 8.

(15) For an order authorizing burial - Form B. M. D. 9.

(16) For a removal order in terms of section twenty-seven of the Act - Form B. M. D. 10.

(17) For a medical or registered midwife’s certificate of a still-birth - Form B. M. D. 11.
(18) For the declaration by a qualified informant regarding a still-birth when no certificate is produced - Form B. M. D. 12.

(19) For an order authorizing the burial of a still-born child - Form B. M. D. 13.

(20) For a magistrate’s order authorizing burial - Form B. M. D. 14.

(21) For a magistrate’s order in terms of section fifteen of the Act authorizing burial of the body of a person who has died outside magisterial district - Form B. M. D. 15.

(22)  

(23)  

(24)  

(25)  

(26) Certified copy of the entry of a birth in the ship’s log - Form B. M. D. 20.

(27) Register for entering certified copies of births entries in the ship’s log - Form B. M. D. 20A.

(28) Certified copy of the entry of a death in the ship’s log - Form B. M. D. 21.

(29) Register for entering certified copies of deaths entries in the ship’s log - Form B. M. D. 21A.

(30) For the preliminary notice requiring an informant to give information for the registration of a birth or death - Form B. M. D. 22.

(31) For the demand requiring that an informant give information concerning a birth or death - Form B. M. D. 23.

(32)  

(33) For the notice required to be given to the district registrar or assistant district registrar regarding the burial of a body without a burial order - Form B. M. D. 25.

[paragraphs 21(3), (4), (7), (22), (23), (24), (25) and (32) deleted by GN 718/1956]

SCHEDULE

[Schedule substituted by GN 1329/1955 and GN 718/1956]

B.M.D. 1.

FORM OF INFORMATION OF A BIRTH.

(Act No. 17 of 1923.)
Warning - The penalties for false statements wilfully made are the same as those for perjury.

Instructions as to the filling in of this form appear on the reverse side hereof.

N.B.:

1. This form must be used for all races with the exception of Natives.

Where more than one child is born at the same confinement, a separate form must be filled in for each child and the word twin, triplet, etc., as the case may be, written at the top right hand corner. The exact time of each birth should be recorded, if known.

Child.

1. Surname .........................................................................................................................
2. First names ....................................................................................................................
3. Date of Birth ..................................................................................................................
4. Sex .................................................................................................................................
5. Place where born .........................................................................................................
6. Race ..............................................................................................................................
7. Residential address of parents or guardian ..................................................................
8. Place of marriage of parents .......................................................................................  

Father of Child.

9. Identity No. ....................................................................................................................
10. Race ............................................................................................................................
11. First names .................................................................................................................
12. Surname ......................................................................................................................
13. Place of birth ..............................................................................................................
14. Age ..............................................................................................................................
15. Occupation ................................................................................................................

Mother of Child.

16. Identity No. ....................................................................................................................
17. Race ............................................................................................................................
18. First names .................................................................................................................
19. Maiden surname .........................................................................................................
20. Place of birth ..............................................................................................................
21. Age ..............................................................................................................................

Informant.

22. Original signature (or mark) .......................................................................................  
23. Qualification ................................................................................................................
24. Residential address .....................................................................................................

For the use of Assistant District Registrar, or Justice of the Peace or Police Officer and District Registrar only.

Date of Receipt ............ 19 .......... Place .................................................................
(Signature) ........................................................................................................................

Assistant District Registrar, Justice of the Peace or Police Officer.

Date of Receipt ............ 19 .......... District .................................................................
(Signature) ........................................................................................................................

District Registrar.

For use in Head Office only:-

1. Form checked ............ 2. Index card written ............................................................
3. Card checked ............
<table>
<thead>
<tr>
<th>Child</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Surname</td>
<td>First Names</td>
<td>Date of Birth</td>
<td>Sex</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Father</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>First Names</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surname</td>
<td>Race</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>First Names</td>
<td>Maiden Name</td>
<td>Race</td>
<td>Assistant Dist. Registrar</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Entry No.</td>
<td>Identity Number</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
B.M.D. 2.

FORM OF INFORMATION OF DEATH

[Form B.M.D. 2. amended by GN 873/1937]

(Act No. 17 of 1923.)

Warning - The penalties for false statements wilfully made are the same as those for perjury.

Instructions as to the filling in of this form appear on the reverse side hereof.

N.B.-This form must be used for all races with the exception of Natives.

Deceased -

1. Identity number ......................................................................................................................
2. Surname .................................................................................................................................
3. First names ............................................................................................................................
4. Date of death ..........................................................................................................................
5. Sex ........................................................................................................................................
6. Place of death ........................................................................................................................
7. Race ......................................................................................................................................
8. Age and date of birth ............................................................................................................
9. Single, married, divorced, widower or widow ......................................................................
10. Occupation ...........................................................................................................................
11. Pensioner or recipient of maintenance allowance or dependant of pensioner or recipient of maintenance allowance ........................................................................................................
12. Causes of death ....................................................................................................................
   (In the case of the death of a mother when giving birth to her first child, this should be stated by
   inserting the words “First Child”).
13. Duration of disease or of last illness ...................................................................................
14. Name of medical practitioner .............................................................................................
15. Place of birth ........................................................................................................................
16. Residential address ............................................................................................................
17. Intended place of burial .........................................................................................................
18. (a) Name of parent or guardian (if deceased was under the age of ten years) ..................
   (b) Place of residence of mother* ..........................................................................................

Informant.

19. Original Signature (or mark) ...............................................................................................  
20. Qualification ...........................................................................................................................
21. Residence .............................................................................................................................  
   For the use of Assistant District Registrar or Justice of the Peace or Police Officer and District Registrar only.

Date of Receipt .......................... 19................................................ Place ........................................
   (Signature) .................................................................

Assistant District Registrar, Justice of the Peace or Police Officer.

Date of registration .......................... 19.......................... District ........................................
   (Signature) ................................................................. No. of entry ........................................

District Registrar.

For use in Head Office only:-
1. Form checked ........................................ 2. Index card written ................................................
3. Card checked ........................................

*To be given in the case of an infant less than 1 year who dies in the institution where it was born.
**REGISTER OF DEATHS.**

<table>
<thead>
<tr>
<th>Surname .................</th>
<th>Personal Status .........</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Names .............</td>
<td>Occupation ...............</td>
</tr>
<tr>
<td>Date of Death ..........</td>
<td>Causes of Death ..........</td>
</tr>
<tr>
<td>Sex .....................</td>
<td>Duration of Disease or Last Illness</td>
</tr>
<tr>
<td>Place of Death ..........</td>
<td>Name of Medical Petitioner</td>
</tr>
<tr>
<td>Race ....................</td>
<td>Entry No. ................</td>
</tr>
<tr>
<td>Age and Date of Birth ...</td>
<td>Assistant District Registrar</td>
</tr>
</tbody>
</table>

No. .................... 19 ........

A.

1. Full names of spouses:-
   Husband -
   (Surname) ........................................
   (Christian names) ................................
   Wife -
   (Surname) ........................................
   (Christian names) ................................

2. Date of marriage ........................................

3. Marriage solemnized at ...............................
   (District) .......................................... (Province)

4. Identity number: Husband ............................ Wife ........................................

5. Race: Husband ........................................ Wife ........................................
<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>6.</td>
<td>Age and date of birth: Husband .................................. Wife ..................................</td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>With or without ante-nuptial contract ..........................................................</td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>Personal status: Husband .................................. Wife ..................................</td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>Occupation: Husband .................................. Wife ..................................</td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>Place of birth, province, country: Husband .................................. Wife ..................................</td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>Residential address at time of marriage: Husband .................................. Wife ..................................</td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>Banns or special marriage licence ..........................................................</td>
<td></td>
</tr>
<tr>
<td>13.</td>
<td>Consent given by: Husband .................................. Wife ..................................</td>
<td></td>
</tr>
<tr>
<td>14.</td>
<td>Remarks .......................................................... 19 ..................................</td>
<td></td>
</tr>
</tbody>
</table>

This marriage was solemnized by me on this the .................. day of ................................ 19 .................. 

Marriage Officer.  

Denomination or Magistrate’s Office.  

This marriage was contracted by us ..........................................................  

in the presence of the undersigned witnesses:-  
  1. .......................................................... |
  2. .......................................................... |

.
DUPLICATE ORIGINAL REGISTER.

Instructions for the filling in of this form appear on the reverse side hereof.

No. ........................................... 19 ...........

A.

1. Full names of spouses:—
   Husband—
   (Surname) ..........................................................................................................................
   (First names) ..........................................................................................................................
   Wife—
   (Surname) ..........................................................................................................................
   (First names) ..........................................................................................................................

2. Date of marriage ..................................................................................................................

3. Marriage solemnized at .....................................................................................................
   (District) .................................................................................................................................
   (Province) ..............................................................................................................................

4. Identity number: Husband ............................................ Wife ...........................................

5. Race: Husband ............................................ Wife .........................................................

6. Age and date of birth: Husband ............................................ Wife ..................................

7. With or without ante-nuptial contract ............................................................................

8. Personal status: Husband ............................................ Wife ........................................

9. Occupation: Husband ............................................ Wife .............................................

10. Place of birth, province country: Husband ............................................ Wife ..............

11. Address at time of marriage: Husband ............................................ Wife ..................

12. Banns or special marriage licence ..................................................................................

13. Consent given by: Husband ............................................ Wife ................................
14. Remarks ......................................................................................................................................

B.

This marriage was contracted by us ........................................ day of ........................................ 19 ........................................

Marriage Officer.

..................................................

Denomination or Magistrate’s Office.

..................................................

This marriage was contracted by us* ..............................................................

..................................................

in the presence of the undersigned witnesses:—

*1 ..................................................

*2 ..................................................

C.

†PARTICULARS OF PARENTS OF HUSBAND.

<table>
<thead>
<tr>
<th>Father.</th>
<th>Mother.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full names and surname</td>
<td>........................................</td>
</tr>
<tr>
<td>Date of birth</td>
<td>........................................</td>
</tr>
<tr>
<td>Age</td>
<td>........................................</td>
</tr>
<tr>
<td>Place of birth</td>
<td>........................................</td>
</tr>
<tr>
<td>Date and place of marriage</td>
<td>........................................</td>
</tr>
<tr>
<td>Identity number</td>
<td>........................................</td>
</tr>
</tbody>
</table>

†PARTICULARS OF PARENTS OF WIFE

<table>
<thead>
<tr>
<th>Father.</th>
<th>Mother.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full names and surname</td>
<td>........................................</td>
</tr>
<tr>
<td>Date of birth</td>
<td>........................................</td>
</tr>
<tr>
<td>Age</td>
<td>........................................</td>
</tr>
<tr>
<td>Place of birth</td>
<td>........................................</td>
</tr>
<tr>
<td>Date and place of marriage</td>
<td>........................................</td>
</tr>
<tr>
<td>Identity number</td>
<td>........................................</td>
</tr>
</tbody>
</table>

**D.**

Full Names of Marriage Officer in Capital Letters.

**Letter of Appointment Q** ........................................

**E.**

For use in Head Office only:

- Form checked ........................................
- Index card written ........................................
- Card checked ........................................

*The name represented by any indistinct signature should be inscribed in pencil and in capital letters underneath such signature.
†These particulars must be furnished even if parents are deceased.
Regulations

Births, Marriages and Deaths Registration Act 17 of 1923

General Regulations

Revenue 222.

UNION OF SOUTH AFRICA.

SPECIAL MARRIAGE LICENCE.

It having been made to appear that there does not exist any legal impediment to ........................................

(1) .................................................................................................................................

and .................................................................................................................................

(2) .................................................................................................................................

in the District of ............................................................................................................

being joined in wedlock,

Licence is hereby given to their being united in marriage, without prior publication of banns, anywhere within this Province, in accordance with the laws thereof, by any person authorised in terms of Act No. 43 of 1916 to solemnize marriages; provided that such marriage be celebrated within three months from the date hereof.

Thus done at.....................................................................................................................

In the Province of ...........................................................................................................

this ........................................day of ................................................................. 19 ................................

(Signature) .............................................................

(Designation) .........................................................

(1) Fill in bachelor, widower, or divorcee, as the case may be.

(2) Fill in spinster, widow, or divorcee, as the case may be.
B.M.D. 5.

**BIRTH CERTIFICATE.**
(Certificate issued in terms of Section 40 of Act No. 17 of 1923.)
Birth registered in the District of..........................in the Province of.............

This Certificate is in the form of the entry as finally amended.

<table>
<thead>
<tr>
<th>No. ....................</th>
<th>Child.</th>
<th>Parents.</th>
<th>Informant.</th>
<th>District Registrar, Assistant District Registrar, Justice of the Peace or Police Officer.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. Date of birth.</td>
<td>7. Christian names and surname.</td>
<td>19. Signature (or mark).</td>
<td>When registered or received.</td>
</tr>
<tr>
<td></td>
<td>3. Usual place of residence of Parents or Guardian.</td>
<td>9. Age.</td>
<td>15. Age.</td>
<td>Signature of Assistant District Registrar, Justice of the Peace, or Police Officer.</td>
</tr>
<tr>
<td></td>
<td>15. Age.</td>
<td></td>
<td></td>
<td>Signature of District Registrar.</td>
</tr>
<tr>
<td></td>
<td>17. Occupation.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>19. Signature (or mark).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>20. Qualification.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>22. Witness.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>23. Date.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I........................................................., do hereby certify that the above is a true copy of an entry in the Births
Republic of Namibia

REGULATIONS
Births, Marriages and Deaths Registration Act 17 of 1923
General Regulations

Register kept at........................................
Extracted this ......................................... day of ........................ 19 .................
..........................................................Registrar/District Registrar.
..........................................................Province/District.

Union of South Africa. 2/6.

DEATH CERTIFICATE.
(Certificate issued in terms of Section 40 of Act No. 17 of 1923.)
Death registered in the District of..................in the Province of............

This Certificate is in the form of the entry as finally amended.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>........................</td>
<td>...........................................</td>
<td>.......</td>
<td>................</td>
<td>................................</td>
<td>.........</td>
<td>................................</td>
</tr>
<tr>
<td>To whom issued..........</td>
<td>2. Name of parent or guardian (if deceased was under the age of 10 years).</td>
<td>5. Race.</td>
<td>9. Pensioner or dependent of pensioner.</td>
<td>14. Causes of death.</td>
<td>17. Signature (of mark).</td>
<td>Station.</td>
</tr>
<tr>
<td>........................</td>
<td>...........................................</td>
<td>.......</td>
<td>................</td>
<td>................................</td>
<td>.........</td>
<td>................................</td>
</tr>
<tr>
<td>........................</td>
<td>...........................................</td>
<td>.......</td>
<td>................</td>
<td>................................</td>
<td>.........</td>
<td>................................</td>
</tr>
<tr>
<td>Date of Issue............</td>
<td>3. Sex.</td>
<td>6. Age.</td>
<td>10. Date of death.</td>
<td>15. Duration of disease or of last illness.</td>
<td>18. Qualification. Station.</td>
<td>Signature of Assistant District Registrar, Justice of the Peace, or Police Officer. When registered.</td>
</tr>
<tr>
<td>........................</td>
<td>...........................................</td>
<td>.......</td>
<td>................</td>
<td>................................</td>
<td>.........</td>
<td>................................</td>
</tr>
<tr>
<td>........................</td>
<td>...........................................</td>
<td>.......</td>
<td>................</td>
<td>................................</td>
<td>.........</td>
<td>................................</td>
</tr>
</tbody>
</table>

B.M.D.6.
### Republic of Namibia

#### Annotated Statutes

**REGULATIONS**

**Births, Marriages and Deaths Registration Act 17 of 1923**

**General Regulations**

<table>
<thead>
<tr>
<th>Entry No</th>
<th>12. Usual place of residence</th>
<th>District Registrar. No. of entry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Province</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

District

1. ................................................., do hereby certify that the above is a true copy of an entry in the Births Register kept at ...............................................................

Extracted this ............................... day of ........................... 19 ...........................................................

........................................................... Registrar/District Registrar.

........................................................... Province/District.

---

#### MARRIAGE CERTIFICATE.

No. ........................................../19 ............... (Issued in terms of Section 40 of Act No. 17 of 1923.)

<table>
<thead>
<tr>
<th>Province</th>
<th>Race</th>
<th>Wife</th>
<th>Marriage solemnized at.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>No.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### General Regulations

<table>
<thead>
<tr>
<th>When married</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Full names of spouses</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
</table>

This Marriage was solemnized by me on this the ________ day of ________________ 19 __________ in the presence of the undersigned witnesses -

and

As witnesses -

1. .......................................................... Minister.  
2. .......................................................... Denomination.

To whom issued | Magistrate |   |   |   |
|---------------|------------|--|--|

I .........................................................., do hereby certify that the above is a true copy of the Marriage Register kept in my office of the Marriage of ........................................... and ........................................... Witness my hand and seal at ........................................... this ............. day of .............. 19 .......

Date of issue |   |   |   |   |
|--------------|--|--|--|--|

(Signature) .................................................................................................................

Designation ...................................................................................................................

No. .................................................................

B.M.D. 8

BIRTHS AND DEATHS REGISTRATION ACT,
No. 17 OF 1923.
(Sections 23 and 32.)

MEDICAL CERTIFICATE OF THE CAUSE OF DEATH.
Births, Marriages and Deaths Registration Act 17 of 1923
General Regulations

All persons are warned against accepting or using this Certificate for any purpose whatever except that of delivering it to the District Registrar or Assistant District Registrar.

I hereby certify that I attended ............................................................. during his/her illness since ......................................................... 19 .............................................................; that his/her age was .............................................................; that I last attended him/her Alive on ............................................................. 19 .............................................................; that that to my personal Knowledge (1) death took place on ............................................................. 19 .............................................................; that I saw and identified the body on (2) ............................................................. 19 .............................................................; and that to the best of my knowledge and belief the death was due solely and exclusively to natural causes as stated here under:-

Cause of Death. Duration of Illness (not of attendance) Years, Months, and Days.

Contributing Causes or Illnesses.

Special Investigations, Pathological Examination. Should the Medical Practitioner be in a position to give additional information at a later date for more precise statistical classification, he should signify below.

Witness my hand, this ....................... day of ...................................... 19 .............................................................

Name and address of informant to whom this certificate is handed. (To be filled in by medical man.)
REGULATIONS
Births, Marriages and Deaths Registration Act 17 of 1923
General Regulations

Signature of Medical Practitioner.

.............................................. Registered Qualifications .................................................................

.............................................. Residence ..............................................................................

Date on which so handed ................................................. 19 ................................................................

NOTE:—If the Medical Practitioner is unable to certify that the death was due solely and exclusively to natural causes, the following report should be made:—

To the Magistrate of the District of .................................................................

I have to report, in terms of Section 23 (2) of Act No. 17 of 1923, that I am unable to give a certificate in the form shown above in the case of ......

.............................................. Of ................................................................. who died

On the .............................................. 19 ................................................................. 19

.............................................. Signature

.............................................. Registered Qualifications.

.............................................. Residence

Date .............................................. 19 ..............................................

_________________

(1) If this information is not within the personal knowledge of the certifier substitute “as I am informed”.

(2) If body not seen and identified, draw pen through this item.

No..............................................

BURIAL ORDER (URBAN AREAS),
(Act No. 11 of 1923.)

I, the undersigned, do hereby authorize the burial in

the ................................................................. Cemetery at .................................................................

of the body of ................................................................. aged .................................................................
whose death has been duly registered by me.

Cause of death ........................................................................................................................................

Witness my hand this ........................................ day of ...................................................... 19 ......................
........................................................................................................ District or Station ........................................ Province
........................................................................................................ District Registrar or Assistant District Registrar

NOTE.—This order is to be produced by the person receiving it from the District Registrar or Assistant District Registrar (Urban Areas) to the person who buries the body or performs any funeral or religious service in connection with its burial, and delivered to the person in charge of the burial place.
No ....................

REMOVAL ORDER.

(Section 27 of Act No. 17 of 1923.)

Authority is hereby granted to ................................. of ........................
to remove to .................................. the body of .................................
who died at ................................ on the ..............................................
and whose death was registered by me on the ...........................................
Cause of death ..........................................................................................
(Entry No. .................................................................)

Issued at ................................................................. District,
In the ................................................................. Province,
on this, the ................................................................. 19 ..............

.................................................................

DISTRICT REGISTRAR.

.................................................................

ASSISTANT DISTRICT REGISTRAR.

N.B.—This removal order must be produced by the person removing the body to the Railway Authorities when the body is conveyed by train, or to the Police Authorities when asked to do so.
<table>
<thead>
<tr>
<th>No.</th>
<th>B.M.D. 11</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

MEDICAL OR REGISTERED MIDWIFE’S CERTIFICATE OF A STILL-BIRTH.
(Act No. 17 of 1923.)
(To be given forthwith by the Medical Attendant or Registered Midwife to one of the Persons whose

duty it is to give information of the still-birth to the District Registrar, Assistant District Registrar,

Justice of the Peace or Police Officer.)

I hereby certify that on the ................................................................. 19 .....................
I attended during the birth of (1) and examined the body
of a male, female child, of whom (2) ..........................................................

and ........................................................................................................... were respectively father and

mother, living at ........................................ Street ..............................................

and that the said child was not born alive.

Date .......................................................... (Signature) ..............................................

Name and address of informant to whom given: (Registered qualifications) ...........................................

.......................................................... (Residence) ..............................................

..........................................................

(1) In the case of a Registered Midwife, delete the words “and examined the body of”.

(2) Omit name of father in cases of illegitimate births, and make other entries in this and the next line

accordingly.

N.B.—This Certificate is intended solely for Registration purposes.
DECLARATION BY A QUALIFIED INFORMANT RE STILL-BIRTH.

(Act No. 17 of 1923.)

I (1) .............................................of (2) ......................................................do solemnly and sincerely declare that I (3) .............................................a certain (4) .............................................child, born on the .............day of .....................................................19 ..................to (5) .............................................and of (6) .....................................................more fully described in the annexed Birth Information Form, and that the said child was not born alive.

I further declare that (7) .....................................................residing at .....................................................assisted at the birth.

.................................................................
Signature or Mark of Declarant.

Made up and signed before me at .............................................this .............day of .....................................................19 ..........

.................................................................
Commissioner of Oaths.

(1) Insert name of declarant.
(2) Insert name of dwelling, street, and name of place of residence.
(3) Insert “was the father of” or “was present at the birth of” or “am occupier of dwelling where child was born”, as the case may be.
(4) Insert “male” or “female” as the case may be.
(5) Insert names of parents or name of mother if birth is illegitimate.
(6) Insert name of dwelling, street and name of place of residence.
(7) Insert name of person not registered as midwife.
BURIAL ORDER FOR STILL-BIRTH (URBAN AREAS).

(Act No. 17 of 1923.)

I, the undersigned, do hereby authorise the burial in the .......................................................... Cemetery .................................................................

of the stillborn* .................................................. child of ..........................................................

................................................................. the birth having been duly reported to me.

Witness my hand this ............................... day of .............................. 19 ......................

..........................................................................................................

District Registrar or Assistant District Registrar (Urban Areas).

............................ District or Station. ................................................. Province

__________

* Enter male or female, as the case may be.

NOTE.—This Order must be produced by the person receiving it from the District Registrar or Assistant District Registrar (Urban Areas) to the person who buries the body or performs any funeral or religious service in connection with any burial, and delivered to the person in charge of the burial place.

MAGISTRATE’S ORDER FOR BURIAL (URBAN AREAS).

(Section 24 of Act No. 17 of 1923.)

I, the undersigned, Magistrate for the District of ..........................................................

do hereby authorize the burial in the ................................................................. Cemetery at .......................................................... of the body of ..........................................................

* upon which an inquest has been held.

Cause of death .................................................................

Witness my hand this ............................... day of .............................. 19 ......................

.................................................................Magistrate

* Delete these words if no inquest has been held.
NOTE.—This order must be produced to the person who buries the body or performs any funeral or religious service in connection with its burial, and delivered to the person in charge of the burial place.
ORDER AUTHORIZING THE BURIAL OF A BODY OF A PERSON WHO HAD DIED OUTSIDE THE MAGISTERIAL DISTRICT IN WHICH IT IS TO BE BURIED.

(Section 15 of Act No. 17 of 1923.)

Permission is hereby granted to.................................................................
of .................................................................................................................
to bury in the ........ Cemetery at ............................................................
the body of..........................................................................................
Who died at ..........................................................................................
on the .....................................................................................................
Cause of death ......................................................................................

Magistrate of the .......................................................... District,
Date ................................................. ......................................... Province.

NOTE.—This order may be issued on a Sunday or a public holiday by the officer in charge of a police station in the magisterial district in which the body is to be buried.

B.M.D. 20.

UNION OF SOUTH AFRICA.

For use of the Master of any Ship carrying Passengers to or from any Port in the Union as the Port of Destination or Departure, in case of any Birth occurring while such Ship is in any Port of the Union or at Sea while trading to any Port of the Union.

FORM OF INFORMATION OF A BIRTH ON SHIPBOARD.

(Section 36 of Act No. 17 of 1923.)

To be handed to the Immigration Officer of the first Port of Entry in the Union, or if there he no Immigration Officer, then to the nearest Magistrate or Police Officer.

CHILD -
Date of birth.................................................... 19......
Place of birth.........................................................
Whether living or dead at birth...................................................
Christian names of child ..........................................................
Sex .................................................................................

FATHER -
Names and surname .........................................................
Race or nationality ..........................................................
Rank, profession, or occupation ............................................
Last place of abode ................................................................

MOTHER -
Names and maiden surname ..................................................
Race or nationality ..........................................................
Last place of abode ................................................................
Address of parent(s) in Union ..................................................
Name of ship ...........................................................................
Date ................................................................. 19 .............

Certified to be a true extract from the log.
Master or Officer in Charge.
Port or locality
This section to be filled up 'by District Registrar alone.
No. of entry
When registered
19

(Signature)
District Registrar.

* State latitude and longitude or port.
BIRTHS REGISTER.

REGISTER OF CERTIFIED COPIES OF ENTRIES IN THE SHIP’S LOG, RECEIVED BY THE DISTRICT REGISTRAR

*(Section 36 of Act No. 17 of 1923).*

<table>
<thead>
<tr>
<th>No.</th>
<th>When Registered</th>
<th>When Forwarded to Registrar</th>
<th>Date of Birth</th>
<th>Place of Birth (Latitude and Longitude)</th>
<th>Whether Living or Dead at Birth</th>
<th>Christian Names of Child</th>
<th>Sex</th>
<th>Christian Names and Surname</th>
<th>Race or Nationality</th>
<th>Rank, Profession or Occupation</th>
<th>Last Place of Abode</th>
<th>Names and Maiden Surname</th>
<th>Race or Nationality</th>
<th>Last Place of Abode</th>
<th>Address of Parents in Union</th>
<th>Name of Ship</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
UNION OF SOUTH AFRICA.

For use of the Master of any Ship carrying Passengers to or from any Port in the Union as the Port of Destination or Departure, in case of any Death occurring while such Ship is in any Port of the Union or at Sea while trading to any or ill of the Union.

FORM OF INFORMATION OF A DEATH ON SHIPBOARD.

(Section 37 of Act No. 17 of 1923.)

To be handed to the Immigration Officer of the first Port of Entry in the Union, or if there he no Immigration Officer, then to the nearest Magistrate or Police Officer.

Date of death ................................................................. 19..................

Place of death (1) ..............................................................

Names and surname of deceased ........................................................................

Sex ................................................................. Age ..................................................

Race or nationality ...................................................................................................

Birthplace .................................................................................................................

Personal status ...........................................................................................................

Rank, profession or occupation ..............................................................................

Last place of abode ....................................................................................................

Cause of death ...........................................................................................................

Name of ship ............................................................................................................

Date ................................................................. 19..................

Certified to be a true extract from the log.

.................................................. ..................................................

Master or Officer in Charge.

Port or locality ............................................................... ..........................................

This section to be filled up by the District Registrar alone.

No. of entry .......................................................... 19

When registered .......................................................... 19

(Signature) ..........................................................

District Registrar.

(1) State latitude and longitude or port.
DEATHS REGISTER.
REGISTER OF CERTIFIED COPIES OF ENTRIES IN THE SHIP’S LOG, RECEIVED BY THE DISTRICT REGISTRAR.

(Section 37 of Act Mo. 17 of 1921.)

<table>
<thead>
<tr>
<th>No.</th>
<th>When Registered</th>
<th>When Forwarded to Registrar</th>
<th>Date of Death</th>
<th>Place of Death (Latitude and Longitude)</th>
<th>Names and Surname of Deceased</th>
<th>Sex</th>
<th>Age</th>
<th>Race or Nationality</th>
<th>Birth-place</th>
<th>Personal Status</th>
<th>Rank, Profession, or Occupation</th>
<th>Last Place of Abode</th>
<th>Cause of Death</th>
<th>Name of Ship</th>
</tr>
</thead>
</table>

B.M.D. 21A.
NOTICE.

In terms of Section 3 of Act No. 17 of 1923, requiring a qualified Informant to Register a Birth or a Death.

OFFICE OF THE DISTRICT REGISTRAR,
District of .................................................................
in the ...........................................................................
............................................................... 19 .................................................................

SIR/MADAM,
Having ascertained that a (*)........................................................................................................ has
occurred in the dwelling you occupy, I write to suggest
the advisability of such (*).......................................................... being
registered before the expiration of .................................................................
from the date of the occurrence of such (*).................................................................
the time prescribed by Act No. 17 of 1923, when the
penalties thereunder will accrue.

.................................................................................................................................
I have the honour to be,
Sir
.................................................................................................................................
Your obedient Servant,
Yours faithfully
.................................................................................................................................
District Registrar.

To .................................................................
.................................................................................................................................
.................................................................................................................................
(*) Fill in “birth”, “still-birth”, or “death”, as the case may be.

B.M.D. 22.

NOTICE REQUIRING A QUALIFIED INFORMANT TO REGISTER A BIRTH OR DEATH.
Office of the District Registrar of Births and Deaths.

No. .................................................................
District of .................................................................
in the ................................................................. Province

To .................................................................
.................................................................................................................................
.................................................................................................................................
As a (1) ............................................................................................................................. in respect of which you
are a qualified informant, has occurred at ................................................................. and the time allowed under Section (2).................................................................................................
of Act No. 17 of 1923, for giving the information has
expired, you are hereby required in terms of Section 3
of the said Act to attend personally at .................................................................
on the ........................................ day of ................................................................. next,
at ................................................................. o’clock in the (2) ........................................ there
and then to give such information as may be necessary
concerning the said (1) ........................................................................................................

Dated at ........................................ this ................................................................. day of
.................................................................................... 19 .........................
..................................................................................................................

District Registrar or Assistant
District Registrar.

(1) Fill in “birth”, “still-birth” or “death”, as the case may be.
(2) State whether in terms of Section 18, 19, 21, 29, or 30 of the Act, as the case may be.
(3) Fill in “forenoon” or “afternoon”, as the case may be.
RETURN,

IN TERMS OF SECTION 13 OF ACT No. 17 OF 1923, OF ALL PERSONS BURIED IN THE PUBLIC BURIAL PLACE OR THE BURIAL GROUND at ................................................ during the Month of.................................................................

(Section 37 of Act No. 17 of 1923.)

<table>
<thead>
<tr>
<th>Names.</th>
<th>Sex of Deceased Person.</th>
<th>Last Known Address.</th>
<th>If only Visitor at Address given, state also Usual Residence.</th>
<th>Race.</th>
<th>Date of Death.</th>
<th>Date of Interment.</th>
<th>Cause of Death to be given as far as ascertained.</th>
<th>Date of Burial Order.</th>
<th>Place of Issue.</th>
<th>If no Order, Name of Clergyman or Undertaker.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Certified to be complete.

Place........................................................., Date........ 19  Custodian or Person having charge of Burial Place.
NOTICE

To the District Registrar or Assistant District Registrar of Burial without a Burial Order (Urban Areas).

(Section 26 of Act No. 17 of 1923.)

I, ........................................................................................................................................
being a (*) ........................................................................................................................
do hereby certify that
I have on this ................................ day of .......................................................... 19 ................
at ........................................................................................................................................
performed the burial service over, or buried, the body of
.................................................................................................................. of .......................................................... and that
no burial order was produced, as the case was one of
urgent necessity for the following reasons, viz ............................................................
........................................................................................................................................
(1) ...........................................................................................................Signature.
(2) ...........................................................................................................Signature of Person in charge of Burial Place

Date .................................................... 19 ............

Place ........................................................................................................

CAUTION.— This notice shall be signed (1) by the person who buries or performs any funeral or religious service in connection with the burial of a body, and (2) by the person in charge of the burial place, and shall within 24 hours after the burial be given or sent to the District Registrar or Assistant District Registrar of the District from which the body shall have been brought for burial or within which such burial, or funeral, or religious service shall have been performed.

(*) State capacity in which certificate given.