



GOODWOOD ISLAMIC SOCIETY

BIRTH ANNOUNCEMENT FORM

ENDORSED BY ULEMA OF THE NORTHERN SUBURBS (UNS)

Parent's Details			
Father's Name			
Father's Surname			
Mother's Name			
Mother's Surname			
Address			
Father's Contact Details	Home:	Work:	Cell:
Mother's Contact Details	Home:	Work:	Cell:
Marital Status	<input type="checkbox"/> Married	Date of Marriage: dd / mm / yyyy	Imam:
	<input type="checkbox"/> Other	Details:	
Baby's Details			
Date & Time of Birth	Date:	Time:	
Place of Birth			
Baby's Full Name (Please write clearly in block Letters)	1:	Male <input type="checkbox"/> Female <input type="checkbox"/>	Weight: Length:
	2:	Male <input type="checkbox"/> Female <input type="checkbox"/>	Weight: Length:
	3:	Male <input type="checkbox"/> Female <input type="checkbox"/>	Weight: Length:
	4:	Male <input type="checkbox"/> Female <input type="checkbox"/>	Weight: Length:
	5:	Male <input type="checkbox"/> Female <input type="checkbox"/>	Weight: Length:
	6:	Male <input type="checkbox"/> Female <input type="checkbox"/>	Weight: Length:
Tasmiyyah Details			
Date			
Place			
Would you like to receive a Birth Announcement Certificate from Goodwood Masjied?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Will you be adding a photograph (Digital format only – see 1 below) as part of the certificate? If so, please email to imaam@goodwoodmosque.org.za	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Family History			
Maternal grandparents' names			
Paternal grandparents' names			
Names of other siblings			
Next of Kin			
Contact No. for Next of Kin			
Office Use Only			
Next of Kin			
Relationship to baby			
Details captured in database?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Certificate Sent?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Was a letter of best wishes sent to family?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Signature & Authorization			
The signature below represents and warrants that (a) the party signing below is an authorized representative of the baby/babies family and (b) the information provided herein is complete and accurate. The onus for any misinterpretation or fraudulent information provided will be on the signed applicant specified below.			
Signature of Applicant		Date	
Relationship to baby/babies			
Print Name			
Signature of Masjied Administrator		Date	
Print Name			

1 - Sharp, clear photos are preferred. Good contrast, vertical, head and shoulder shots work best. We will crop your photo electronically to fit our format. Photos may be colour or black and white. Photos will appear in black and white or colour depending on printing availability. Because of the varying quality of photographs received, we do not reprint for poor reproduction. Photos may be submitted electronically (in .jpg format, at 200dpi minimum) via email or on disk/memory stick. Please verify receipt and acceptability. We cannot be responsible for any lost photographs.