

Statutory Instrument No. 123 of 1980

BIRTHS AND DEATHS REGISTRATION ACT
(Cap. 30:01)

**BIRTHS AND DEATHS REGISTRATION (AMENDMENT)
REGULATIONS, 1980**

(Published on 24th October, 1980)

ARRANGEMENT OF REGULATIONS

REGULATION

1. Citation
2. Amendment of regulation 3 of Cap. 30:01 (Sub. Leg.)
3. Substitution of new regulation 6 of principal Regulations
4. Amendment of regulation 9 of principal Regulations
5. Amendment of First Schedule to principal Regulations
6. Amendment of Second Schedule to principal Regulations

FIRST SCHEDULE

SECOND SCHEDULE

IN EXERCISE of the powers conferred on the Minister of Home Affairs by section 22 of the Births and Deaths Registration Act, the following Regulations are hereby made —

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| Citation | 1. These Regulations may be cited as the Births and Deaths Registration (Amendment) Regulations, 1980. |
| Amendment of regulation 3 of Cap. 30:01 (Sub. Leg.) | 2. Regulation 3 of the Births and Deaths Registration Regulations (hereinafter referred to as “the principal Regulations”) is amended by substituting for paragraph (b) thereof the following new paragraph —
“(b) to require the submission to him of any documentary proof he may consider it necessary to have for the proper discharge of of his functions;”. |
| Substitution of new regulation 6 of principal Regulations | 3. The principal Regulations are amended by substituting for regulation 6 thereof the following new regulation —
“Notification of birth 6. (1) Any person wishing to give notice of a birth under section 6 of the Act shall either send to a District Registrar an information form in Form B3 in the First Schedule or give verbal notice of the birth to a District Registrar who shall complete Form B3 in the First Schedule in respect of the birth and cause it to be signed by the applicant.
(2) Any person whose duty it is to give notice of a birth under section 9 of the Act shall either —
(a) send to the District Registrar of the district in which the birth took place an information form —
(i) in Form B3 in the First Schedule, in the case of a live birth; or
(ii) in Form B12 in the First Schedule, in the case of a still-birth; or
(b) give verbal notice of the birth to the District Registrar of the district in which the birth took place who shall complete Form B3 or B12 in the First Schedule, as is |

appropriate, in respect of the birth and cause it to be signed by the applicant.”.

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| 4. Regulation 9 of the principal Regulations is amended by inserting therein, immediately after the words “the First Schedule”, which appear therein, the words “, in the case of a live birth, or in Form B11 in the First Schedule, in the case of a still-birth,”. | Amendment of regulation 9 of principal Regulations |
| 5. The First Schedule to the principal Regulations is amended — | Amendment of First Schedule to principal Regulations |
| (a) by substituting for Form B3 the new Form B3 set out in the First Schedule hereto; | |
| (b) in Form B10, by substituting for the word “Name”, where it appears in item 9 thereof, the word “Names”; and | |
| (c) by adding thereto, immediately after Form B10, the 2 new forms, Forms B11 and B12, set out in the Second Schedule hereto. | |
| 6. The Second Schedule to the principal Regulations is amended in the first column thereof by substituting for item 6 thereof the following new item — | Amendment of Second Schedule to principal Regulations |
| “6. Alteration of surname or forenames in relevant births register. (Sections 15 and 15A)”. | |

FIRST SCHEDULE

(reg. 5 (a)).

“Form B3

REPUBLIC OF BOTSWANA
BIRTHS AND DEATHS REGISTRATION ACT

NOTICE OF LIVE BIRTH

(Regulation 6)

District Registrar's Serial No. B

1. First Name of Child

Other Names of Child (*Not Surname*)

Surname of Child

2. Date of birth 3. Sex Male/Female

4. Full Name of Father
(*Names*) (*Surname*)

5. Full Name of Mother
(*Names*) (*Maiden Surname*)

6. Exact Place of Birth
No. of house and street or road if any

.....
Town or Village

.....
If born in hospital name of hospital

If Mother not normally resident at above place state village and district in which she lives.

7. Normal Residence of Mother

8. If copy of Birth Certificate is required, state Postal Address where it is to be sent.

9. CERTIFICATE TO BE COMPLETED BY INFORMANT

I hereby certify that I attended the above live birth or have knowledge of the fact that the child was born alive on the date and at the place specified and that I am/*was*

1. *Mother of the child*
2. *Father of the child*
3. *Present at birth*
4. *Occupier of dwelling in which birth took place*

.....
Signature (or mark if informant illiterate)

.....
Signature of witness to mark
(if informant illiterate)

Date record signed

Confidential Data

10. Age of mother at birth of child years
11. Is mother married to father Yes/No
12. Previous births to mother No. born alive Male Female
No. born dead Male Female

.....
Date

.....
Signature of Registrar

SECOND SCHEDULE

(reg. 5 (c))

REPUBLIC OF BOTSWANA

"Form B11

BIRTHS AND DEATHS REGISTRATION ACT

CERTIFICATE OF STILL-BIRTH

(Regulation 9)

1. Number
2. Date of Birth
3. Place of Birth District, Botswana
4. Sex
5. Father's Name(s) and Surname
6. Mother's Name(s) and Maiden Surname
7. Date of Registration

I hereby certify the above to be a true and correct extract from the Births Register kept at Gaborone in the Republic of Botswana.

Dated this day of 19....

.....
Registrar of Births and Deaths

REPUBLIC OF BOTSWANA
BIRTHS AND DEATHS REGISTRATION ACT
NOTICE OF STILL-BIRTH

Form B12

(Regulation 6)

District..... Registrar's Serial No. B.....

1. Date of Birth..... 2. Sex Male/Female

3. Full Name of Father.....
(Names) (Surname)

4. Full Name of Mother.....
(Names) (Maiden Surname)

5. Exact Place of Birth.....
No. of house and street or road if any

.....
Town or Village If born in hospital name of hospital
If Mother not normally resident at above place state village and district in which she lives.

6. Normal Residence of Mother.....

7. Cause of Death (if known)

8. Death apparently Recent/Long Standing

9. Certificate to be completed by informant

I hereby certify that I attended the above still-birth or have knowledge of the fact that the child was born dead on the date and at the place specified and that I am/was

1. Mother of the child
2. Father of the child
3. Present at birth
4. Occupier of dwelling in which birth took place

.....
Signature (or mark if informant illiterate)

.....
Signature of witness or mark

.....
Date record signed

Confidential Data

10. Age of mother at birth of child..... years

11. Is mother married to father Yes/No

12. Previous births to mother No. born alive..... Male..... Female

No. born dead..... Male..... Female

.....
Date

.....
Signature of Registrar

MADE this 16th day of October, 1980.

K.L. DISELE,
Minister of Home Affairs.