



Mother File NO.

Baby File NO.

Type of baby Delivery ?

Normal Delivery

Cesarean Section

single

or

twin

Baby Gender

male

female

Incase a Twin (How many males & femals ?)

female

male

Blood Group

A+

B+

O+

AB+

A-

B-

O-

AB-

Duration of Pregnancy in weeks

Full baby name

Baby first name

Second name (father)

Third name

Forth name (family)

Fathers information :

ID Number(National Identification \ Iqama \ Border number

ID VERSION

Absher Registered Mobile Number

Nationality

Fathers information :

ID Number(National Identification \ Iqama \ Border number

ID VERSION

Absher Registered Mobile Number

Mothers date of birth \ \

Nationality

Was they took blood sample from babys heel wthin 24 hrs from birh ?

YES

NO

Father Signature

Prepared by \ aziza alzahrani

Contact no: 011- 4767222

EXT : 407

Please make sure that The form is filled in and submitted by the father only to the birth notification officer and make sure that all information is correct .