



**Greater Chennai Corporation**  
**Public Health Department**  
**Declaration Form for Child Name Inclusion in Birth Certificate**

To:  
Birth and Death Registrar  
Greater Chennai Corporation

I hereby declare that our Male/Female child born on -----  
at (if House birth address)-----  
Hospital address-----  
Name of Mother Tmt -----  
Name of Father Thiru -----has  
been named as ----- . The name of  
the child given here is correct, complete and final. We are well aware  
that the name once registered in the Birth Register cannot be  
changed at any cost.

**Signature of Parent**

Name:

Address:

Date of Name Inclusion :

Signature of Birth&Death Registrar: