

Lnug Citizen New Born Registration

Congratulations on the Birth of your new baby! The Lnug nation thanks you for taking on this unparalleled responsibility with this birth all Lnug are reminded of our collective responsibility to the our nation's youth. This form is to be filled out exclusively by the parents of the new born with exception of the "Lnug Citizen Registration#" which may only be completed by a member of the LNC or designate.

Lnug Citizen registration#: _____

Date of Birth: _____

Lnug Date received: _____

Time of Birth: _____

Full name of Lnug Father: _____

Gender ☐ Female ☐ Male

Full name of Lnug Mother: _____

New Born's Full Name: _____

Date of Birth: _____

Place of Birth: _____

Permanent Address at Birth: _____

New Born's Emergency contact #: _____

Primary Guardian in case of orphanacy: _____

Full Name of Mother at Birth: _____ Full Name of Father at Birth: _____

Date of Birth of Mother: _____ Date of Birth of Father: _____

Ethnic association of Mother: _____ Ethnic association of Father: _____

Other thoughts and comments:

The preceding information is collected exclusively for use by the LNC and is confidential. Any unauthorized use of these materials or the information therein is strictly forbidden and constitutes a charge of identity thief. Unauthorized use of the information may result in loss of citizenship.

Print Name of Mother: _____

Print Name of Father: _____

Sign Name: _____

Sign Name: _____

Date: _____

Date: _____

