



Registrar General's Department

Issue Date:
19th August, 2025

BIRTH REGISTRATION FORM

1. Birth in the district of: **PORT MARIA**
2. Parish: **ST. MARY**
3. No. **FB 6053**
4. Place of Birth: **PUBLIC GENERAL HOSPITAL PORT MARIA**
5. Date of Birth: **TWENTY-FOURTH AUGUST, 2008**
6. Sex: **MALE**
7. Name of Child: **QUE-WAYNE NATHAN ANTONIO *****

8. Physician or registered midwife in attendance: **NURSE N MCKENZIE**

9. Name and Surname: **WAYNE ANTHONY CLARKE ***** **FATHER**

10. Age at time of birth: **38 YEARS**

11. Occupation: **POLICE OFFICER**

12. Birthplace: **KINGSTON**

13. (a) Residence: **FRIENDSHIP**

MOTHER

(b) Town/Village: **ISLINGTON**

(c) Parish: **ST. MARY**

14. No. of Children previously born to mother (a) Alive:

1

(b) Still-born: **nil**

15. Name and Surname: **NATTALEE COLLESIA PRENDERGAST *****

Maiden Name: **nil**

17. Occupation: **PRE-TRAINED TEACHER**

16. Age at time of birth: **29 YEARS**

18. Birthplace: **ST MARY**

19. Name and Surname: **WAYNE ANTHONY CLARKE *****

INFORMANT(S)

NATTALEE COLLESIA PRENDERGAST ***

20. Qualification: **FATHER**

MOTHER

21. (a) Residence: **FRIENDSHIP**

FRIENDSHIP

(b) Town/Village: **ISLINGTON**

ISLINGTON

(c) Parish: **ST. MARY**

ST. MARY

22. (a) Signed in my presence by said informant:

REGISTRAR'S CERTIFICATE

23. Witness: **nil**

24. Date: **TWENTY-SIXTH AUGUST, 2008**

Signed by Registrar

26. Name: **nil**

NAME IF ADDED AFTER REGISTRATION OF BIRTH

27. Authority: **nil**

28. Date Added: **NIL**

Last line of Vital Data

Desmond Davis

Desmond Davis (Act.)

**Registrar General &
Deputy Keeper of the Records**

**THIS CERTIFICATE IS NOT VALID UNLESS
BEARING SIGNATURE OF THE REGISTRAR GENERAL**