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| Baby certificates will be presented at Australia Day Award ceremonies across the region. | | | | | | | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **YOUR DETAILS** | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | **First name** | | | | |  | | **Surname** | | | | | | | | | | | |  | | | | |  | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | **Email Address** | | | | | | | | | | | |  | **Mobile / contact number** | | | | | |  | | | | | | | | | | | |  |  | | | | | |  | | | | | | | | | | | | | | | | | | | **Postal address** | | | | | | | |  | | **State** | | | |  | | **Postcode** | | |  | | | | | | | |  | |  | | | |  | |  | | |  | | | | | | | | | | | | | | | | | | | **PARENT DETAILS (if different to applicant details)** | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | **First Name** | | |  | | | **Surname** | | | | | | | | | | | | |  | | |  | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | **Email Address** | | | | | | | | |  | | **Mobile / contact number** | | | | | | | |  | | | | | | | | |  | |  | | | | | | | |  | | | | | | | | | | | | | | | | | | | **Postal address** | | | | | | | |  | | **State** | | | | |  | | **Postcode** | |  | | | | | | | |  | |  | | | | |  | |  | | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  | | | | | | **CHILD DETAILS** | | | | | |  | | | | | | **First Name** |  | **Surname** |  | **Date of Birth** | |  |  |  |  |  | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | **SELECT WHICH AUSTRALIA DAY CEREMONY YOU WILL BE ATTENDING** | | | | | | | | | | | | | | | | | | |  |  |  | |  | | | | | |  | | | | | |  | | | Biggenden | Eidsvold | Gayndah | | Monto | | | | | | Mount Perry | | | | | | Mundubbera | | | |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | |  | | | | | | | | **AUTHORISATION** | | | | | | | |  | | | | | | | | **Signature** | |  | | **Date** | | | |  | |  | | Click or tap to enter a date. | | | |  | | |  |  | | | | **LODGEMENT OF YOUR APPLICATION** | | | | | | | | **Mail** | PO Box 390, Gayndah, Qld 4625 | | | | **Email:** | [admin@northburnett.qld.gov.au](mailto:admin@northburnett.qld.gov.au) | | **In person** | Visit our Library and Customer Service Centres | | | | **Phone:** | 1300 696 272 | | | | | | | | | | | | | | | | | | | | | | | | | | |





**Application for Baby Certificate Nomination**

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