DATA COLLECTION FORM – BASIC INFORMATION

Region: Focus Neighbourhood (if applicable):	Region:	Cluster:	Locality:	Focus Neighbourhood (if applicable):	
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No.	First Name	Family Name	Sex (F/M)	Age / Date of Birth	Registered Bahá'í (Y/N)	Date of Enrolment / Registration (if applicable)	Contact Details		
							Address	Telephone	Email
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