

APPLICATION FORM FOR REGISTRATION OF INDIAN NATIONALS

NAME : _____

FATHER'S NAME : _____

DATE OF BIRTH : _____

ADDRESS IN THAILAND : _____

ADDRESS IN INDIA : _____

EMAIL ID : _____

PASSPORT NUMBER : _____

PLACE AND DATE OF ISSUE : _____

PROFESSION : _____

CATEGORY OF THAI VISA : _____

EMPLOYER'S NAME AND ADDRESS : _____

DETAILS OF FAMILY (Give Passport Numbers and Date of Issue)

NAME OF SPOUSE : _____

NAME (S) OF CHILD/CHILDREN : _____

NAME RELATIONSHIP AND CONTACT DETAILS OF NEXT OF KIN IN INDIA (ASAPPLICABLE)
