## 1. Personal information

Title			First Name		
			Middle Name		
			Last Name		
Date of	f Birth			Nationality	
Passpo	rt No.				

## 2. Contact details

Email ad	dress					
Contact details outside Thailand						
Address of habitual						
residenc	e outs	side				
Thailand	d					
Mobile p	ohone	number				
outside <sup>-</sup>	Thaila	nd				
			Con	tact det	ails in Thaila	nd
Address	of res	idence				
in Thaila	and					
Mobile p	ohone	number				
in Thaila	and					
	Details of contact person (1)					
		(e.g. fam	ily member	s, relativ	es, close frie	nds, or colleagues)
Title		First	Name			
		dle Name				
		Last	Name			
Date of Birth				Nationality		
Passport No.						
Address of residence						
Mobile phone number						
Details of contact person (2)						(2)
		(e.g. fam	ily member	s, relativ	es, close frie	nds, or colleagues)
Title		First	: Name			
		Mid	dle Name			
	Last		Name			
Date of Birth				Nationality		
Passport No.						
Address of residence						
Mobile phone number						
Email address						

## 3. Travel details

Countries / Cities / Area visited during the past (Please specify cities and in conjunction with the in which they are locat e.g. "Milan, Italy")	14 days nd areas e countries			
		Travel to	Thailand	
Originating point of departure				
(Please specify city and	d country)			
Point of transit (if any)				
(Please specify city and country)				
(Intended)			(Intended)	
Date of departure	arture		Date of arrival	
(Intended)	Intended)		(Intended)	
Time of departure			Time of arrival	
Flight Number(s),				
(Please specify if trave				
for travel with multiple				
please specify all flight				

4. Health details (Please write "Yes" or "No"; "Yes" reflects as true the indicated statement)

	•	
I am in good health.	I have <u>none</u> of the following conditions:	
	(a) cough;	
	(b) runny nose;	
My body temperature	(c) sore throat;	
is below 37.5°C.	(d) breathing difficulty.	
During the past 14 day		
transmission and crow		
I acknowledge and acc		
inter alia, my present		
Fit to Travel health ce		
laboratory result indic		
no more than 72 hour		
covers healthcare and		
of COVID-19, through		
minimum coverage an		
evidence demonstrati		
documentary evidenc		
Quarantine for a perio		

5. Compliance with disease prevention measures prescribed by the Government (Please write "Yes" or "No"; "Yes" reflects as true the indicated statement)

I acknowledge and accept that, upon my entry into Thailand:	
(a) I shall be subject to entry screening procedures for the purpose of	
COVID-19 detection;	
(b) I shall download and use application(s) and/or be subject to the use	
of tracking systems as designated by the Thai authorities, for the	
purpose of observation and monitoring in respect of COVID-19; and	
(c) At my own expense, I shall be subject to state quarantine for a period	
of at least 14 consecutive days at the Quarantine Site referred to in	
Section 4, and be subject to RT-PCR test(s) as required.	
I declare and accept that, while in Thailand, I shall comply with the disease	
prevention measures prescribed by the Government of Thailand under	
relevant Regulations issued under Section 9 of the Emergency Decree on	
Public Administration in Emergency Situations B.E. 2548 (2005), which may	
include, but are not limited to, the following:	
(a) cleaning by wiping surfaces of relevant places before organization	
of activities and disposal of waste on a daily basis;	
(b) wearing surgical masks or cloth masks;	
(c) washing hands with soap, alcohol, gel, or disinfectant;	
(d) keeping a distance of at least 1 meter apart while sitting or standing	
to prevent physical contact or the spread of disease through saliva	
droplets;	
(e) limiting the number of participants in activities to prevent	
overcrowding or reducing the time spent on activities as necessary	
on the basis of avoidance of physical contact; and	
(f) complying with additional measures introduced in accordance with	
relevant Thai laws and regulations concerning communicable diseases.	

I certify that all the information declared above is true to my knowledge and give consent to the Ministry of Foreign Affairs of Thailand to collect my personal information in order to coordinate with the concerned agencies for the purpose of screening and facilitating my travel to Thailand.

I declare that I have understood all that is stated above and shall strictly abide by them. I also declare and accept that I shall comply with the provisions under relevant *Regulations issued under Section 9 of the Emergency Decree on Public Administration in Emergency Situations B.E. 2548 (2005)* and any other disease prevention measures prescribed by the Government of Thailand, acknowledging that failure of such compliance may lead to consequences under the laws and regulations of Thailand.

(Signature)	
(	 )
Date	