



Information Sheet - New registration

(Write in CAPITAL letters)

Personal information

surname:	first names:
nationality:	
place of birth:	country of birth:
date of birth:	<input type="checkbox"/> man <input type="checkbox"/> woman

Address

address in Belgium:		
street:	number:	bus/apartment nr:
postcode:	city:	
most recent address outside Belgium:		
country:	city/town:	
street:	number:	
information for the police:		
Phone number:		
Floor of the room:		
Room number/apartment number		
Sharing the room with:		
When can the police officer come by: (in the evening, during the day, weekends, from what hour?):		

Traveldocuments

<input type="checkbox"/> a passport	<input type="checkbox"/> an identity card
number :	
<input type="checkbox"/> a visa	
If so, which type?	<input type="checkbox"/> typ C <input type="checkbox"/> typ D

Date of arrival

in Belgium:	in the Schengen area:
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Contact

phone number:
e-mail:

Information about your marital status (tick the appropriate box)

<input type="checkbox"/> never married	
<input type="checkbox"/> married	
<input type="checkbox"/> divorced	date of divorce:
<input type="checkbox"/> widow or widower	date of death:
Is this your first marriage? <input type="checkbox"/> yes <input type="checkbox"/> no	

The undersigned certifies that the information provided is true and authentic.





Date	Signature
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