

# HIGH COMMISSION OF INDIA, BRUNEI DARUSSALAM

Simpang 337, Lot No. 14034, Kampong Manggis, Jalan Muara, Bandar Seri Begawan-3880.

(Postal: P.O.Box 439, Airport Lama, Berakas, BSB-1904)

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## REGISTRATION FORM FOR INDIAN NATIONALS IN BRUNEI

*(Please fill in all items in full)*

**Registration No.** \_\_\_\_\_

*(To be provided by the High Commission at the time of the submission)*

**Name** \_\_\_\_\_

*(underline the Last/Family/Surname)*

**(Head Of Family)** \_\_\_\_\_ **Regd.No.** \_\_\_\_\_

**Date Of Birth** \_\_\_\_\_ **Marital Status** \_\_\_\_\_

**Residence Address** \_\_\_\_\_

**Phone, Fax & E-mail** \_\_\_\_\_

**Occupation/Professional/Vocation** \_\_\_\_\_

**Designation, if any** (Grade, for Students) \_\_\_\_\_

**Employer/Company/School** \_\_\_\_\_

**Phone, Fax & E-mail** \_\_\_\_\_

**Passport No.** \_\_\_\_\_ **Date Of Issue** \_\_\_\_\_

**Place Of Issue** \_\_\_\_\_ **Date Of Expiry** \_\_\_\_\_

**Permanent Address in India** \_\_\_\_\_

**In Brunei, Date Of First Entry** \_\_\_\_\_ **Last Entry** \_\_\_\_\_

**Expected Further Stay in Brunei** \_\_\_\_\_

**Person to be informed in India in case of Emergency:**

**Name & Address** \_\_\_\_\_

**Phone, Fax & E-mail** \_\_\_\_\_

**Other Household Members in Brunei** *(To be filled only by a Head Of Family)*

Name	Age	Occupation	Relation	Regd. No.
1.				
2.				
3.				
4.				

**Date** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Kindly intimate the High Commission of any change in the above particulars including your departure from Brunei.**