

## High Commission of the Republic of Fiji

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## **REGISTRATION FORM**

First Name:		Surname:
Passport No:		
Start date:		Expiry date:
Address:		
Postcode:		
Address (if you are planning to move on the next 12 months):		
Home phone:		Mobile phone:
Date of birth:		
e-mail address:		
Occupation:		
Marital status:		
Spouse's name:		Spouse's phone:
Number of children:		
1.	Name:	DOB:
2.	Name:	DOB:
3.	Name:	DOB:
4.	Name:	DOB:
5.	Name:	DOB:
Emergency contact details:		
Holder of (please tick): Dual Passport Dual Passport		
If dual passport, country of issue:		
Other Information:		

<sup>\*</sup> To all Fiji nationals in the UK, Ireland, Holy See, Israel, Denmark and Egypt who wish to register, please fill it in and mail to the above address.