1. Personal information

Title	le		First Name		
			Middle Name		
			Last Name		
Date of Birth				Nationality	
Passport No.					

2. Contact details

Email address						
		Conta	ct details	outside Thai	iland	
Address of habitua	ıl					
residence outside						
Thailand						
Mobile phone num	ber					
outside Thailand						
		Cor	ntact det	ails in Thailar	nd	
Address of residence	ce					
in Thailand						
Mobile phone num	ber					
in Thailand						
	Details of contact person (1)					
(e.g. fam	nily member	s, relativ	es, close frier	nds, or colleagues)	
Title	First	Name				
		le Name				
		Name				
Date of Birth				Nationality		
Passport No.						
Address of residence	ce					
Mobile phone num	ber					
		Deta	ils of co	ntact person	(2)	
(e.g. fam	nily member	rs, relativ	es, close frier	nds, or colleagues)	
Title	First	Name				
	Midd	le Name				
	Last	Name				
Date of Birth				Nationality		
Passport No.						
Address of residence						
Mobile phone num						
Email address						

3. Travel details

Countries / Cities / Are visited during the pass (Please specify cities in conjunction with the which they are locate e.g. "Milan, Italy")				
		Travel to	Thailand	
Originating point of de				
(Please specify city ar				
Point of transit (if any				
(Please specify city ar				
(Intended)			(Intended)	
Date of departure			Date of arrival	
(Intended)			(Intended)	
Time of departure			Time of arrival	
Flight Number(s),				
(Please specify if trav				
for travel with multip				
nlease specify all flights)				

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 days		
transmission and crowd		
I acknowledge and acce		
inter alia, my presenta		
to Travel health certific		
result indicating that Co		
no more than 72 hours		
healthcare and treatme		
19, throughout the dura		
coverage amount of 10		
demonstrating a guarar		
evidence confirming th		
at least 14 consecutive		

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, <u>while in Thailand</u>, 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	