Declaration Form Page 1/3

## 1. Personal information

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

## 2. Contact details

. Contact details					
Email address					
Contact details outside Thailand					
Address of habitual					
residence outside					
Thailand					
Mobile phone number					
outside Thailand					
	Con	tact det	ails in Thaila	nd	
Address of residence					
in Thailand					
Mobile phone number					
in Thailand					
Details of contact person (1)					
(e.g. fam	(e.g. family members, relatives, close friends, or colleagues)				
Title	t Name				
Mid	dle Name				
Las	Name				
Date of Birth			Nationality		
Passport No.					
Address of residence					
Mobile phone number					
	Deta	ils of co	ntact person	(2)	
(e.g. fam	ily member	s, relativ	es, close frie	nds, or colleagues)	
Title Firs	t Name				
Mid	dle Name				
Las	Name				
Date of Birth			Nationality		
Passport No.	_				
Address of residence					
Mobile phone number					
Email address					

## 3. Travel details

Countries / Cities / A visited during the pa (Please specify cities in conjunction with t in which they are loce.g. "Milan, Italy")					
Travel to Thailand					
Originating point of o					
(Please specify city o	and country)				
Point of transit (if an					
(Please specify city o					
(Intended)			(Intended)		
Date of departure		Date of arrival			
(Intended)			(Intended)		
Time of departure		Time of arrival			
Flight Number(s),					
(Please specify if tra					
for travel with multip					
please specify all fli					

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	(c) sore throat;	
temperature is below	(d) breathing difficulty.	
37.5°C.	(a) Breathing anneatty.	
During the past 14 day		
transmission and crow		
I acknowledge and acc		
on, inter alia, my pres		
Fly or Fit to Travel he		
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		

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	