

РНОТО

EMBASSY OF THE REPUBLIC OF CUBA CONSULAR SECTION APPLICATION FORM FOR A VISA

(To be completed in block letters)

| Full names and surnames: | |
|--|---|
| Date of Birth:///// Y | Country of Birth: |
| Nationality: | _ Sex: Marital Status: |
| Profession: | Occupation: |
| | |
| | E-mail: |
| Name and business address: | |
| Passport No.: | Type: |
| Issuing Country: I | ssuing date:// Valid until:// D M Y D M Y |
| Purpose of visit: | |
| Was the applicant previously in Cuba? | When? |
| Name of person, institution or company | y to visit in Cuba: |
| (For bu | siness and official visits) |
| Date of entry: | Date of exit: |
| Place of embarking: | Place of entry: |

| Particulars of minor children vapplicant's passport. | who will accompany the applica | ant and are included in the | |
|--|------------------------------------|-----------------------------|--|
| Name | Place of Birth | Date of Brith | |
| | | | |
| | | | |
| I declare that the above particul | ars given by me are true in substa | ance and fact. | |
| | | | |
| Date: | | Signature | |
| | | | |
| | | | |
| THIS SPACE TO BE LEFT BLANK FOR OFFICIAL USE | | | |
| Date of granting | Туре о | of visa | |
| Signature | | | |
| Observations | | | |
| | | | |
| | | | |