**Declaration Form**

**1. Personal information**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Title** |  | | **First Name** |  | | |
| **Middle Name** | Page 1/3 | | |
| **Last Name** |  | | |
| **Date of Birth** | |  | | | **Nationality** |  |
| **Passport No.** | |  | | | | |

**2. Contact details**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Email address** | | | |  | | | |
| **Contact details outside Thailand** | | | | | | | |
| **Address of habitual residence outside Thailand** | | | |  | | | |
| **Mobile phone number outside Thailand** | | | |  | | | |
| **Contact details in Thailand** | | | | | | | |
| **Address of residence  in Thailand** | | | |  | | | |
| **Mobile phone number in Thailand** | | | |  | | | |
| **Details of contact person (1) (e.g. family members, relatives, close friends, or colleagues)** | | | | | | | |
| **Title** |  | | **First Name** | |  | | |
| **Middle Name** | |  | | |
| **Last Name** | |  | | |
| **Date of Birth** | |  | | | | **Nationality** |  |
| **Passport No.** | |  | | | | | |
| **Address of residence** | | | |  | | | |
| **Mobile phone number** | | | |  | | | |
| **Details of contact person (2) (e.g. family members, relatives, close friends, or colleagues)** | | | | | | | |
| **Title** |  | | **First Name** | |  | | |
| **Middle Name** | |  | | |
| **Last Name** | |  | | |
| **Date of Birth** | |  | | | | **Nationality** |  |
| **Passport No.** | |  | | | | | |
| **Address of residence** | | | |  | | | |
| **Mobile phone number** | | | |  | | | |
| **Email address** | | | |  | | | |

**3. Travel details**

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| **Countries / Cities / Areas visited during the past 14 days *(Please specify cities and areas  in conjunction with the countries in which they are located  e.g. “Milan, Italy”)*** | |  | | |
| **Travel to Thailand** | | | | |
| **Originating point of departure  *(Please specify city and country)*** | |  | | |
| **Point of transit *(if any)* *(Please specify city and country)*** | |  | | |
| **(Intended)  Date of departure** |  | | **(Intended)  Date of arrival** |  |
| **(Intended)  Time of departure** |  | | **(Intended)  Time of arrival** |  |
| **Flight Number(s),  (*Please specify if travelling by air; for travel with multiple flights, please specify all flights)*** | |  | | |

**4. Health details (Please write “Yes” or “No”; “Yes” reflects as true the indicated statement)**

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| **I am in good health.** |  | **I have none of the following conditions:**  **(a) cough; (b) runny nose; (c) sore throat; (d) breathing difficulty.** |  |
| **My body temperature is below 37.5oC.** |  |
| **During the past 14 days, I have avoided areas at risk of COVID-19 transmission and crowded places.** | | |  |
| **I acknowledge and accept that my entry into Thailand is conditioned on, *inter alia*, my presentation to the relevant authorities of a Fit to Fly or Fit to Travel health certificate; a medical certificate with RT-PCR laboratory result indicating that COVID-19 is not detected,** **issued  no more than 72 hours before travelling; an insurance policy which covers healthcare and treatment expenses, including those in respect of COVID-19, throughout the duration of my stay in Thailand with a minimum coverage amount of 100,000 USD, or other documentary evidence demonstrating a guarantee to an equivalent effect; and documentary evidence confirming the reservation of the State Quarantine for a period of at least 14 consecutive days.** | | |  |

**5. Compliance with disease prevention measures prescribed by the Government   
(Please write “Yes” or “No”; “Yes” reflects as true the indicated statement)**

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|  |  |
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| **I acknowledge and accept that, upon my entry into Thailand:**   1. **I shall be subject to entry screening procedures for the purpose of COVID-19 detection;** 2. **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** 3. **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, while in Thailand, 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:**   1. **cleaning by wiping surfaces of relevant places before organization of activities and disposal of waste on a daily basis;** 2. **wearing surgical masks or cloth masks;** 3. **washing hands with soap, alcohol, gel, or disinfectant;** 4. **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;** 5. **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** 6. **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** |  |  |