



Embassy of the Kingdom of Bahrain

سفارة مملكة البحرين

Registration No:

Registration Form

Full Name (in English Letters)			
Sex	(Male / Female)	Date of Birth	Date Month Year
Type of Stay	(Permanent/ Temporary)	CPR Number	
Address in Bahrain			
Occupation		Organization Name	
Passport Number		Type of Passport	
Date of Issue		Date of Expiry	
Address in Japan	Post Code:		
Telephone No in Japan	House	Mobile	
Email	@		
Alien Registration NO		Issued by	
Date of Arrival in Japan		Expected Date of Departure	
Contact numbers in Bahrain	Name		
	Address		
	Telephone NO		

I hereby declare that the statement given above is true and correct.

Date

Date Month Year

Signature

Please submit a copy of your passport along with this form by fax to 03-3584-8002.

Please inform the Consular Section of the Embassy when you leave Japan for good.