## REGISTRATION FORM

Please tick as applicable ∀

Please see back of page for more information!

FAMILY NAME (in	capital lett	,,	201110 1110		2100)			
FIRST NAME acco	rding to bi	rth certific	ate (for fo	reigners	according to t	ravel document	:)	
Maiden name								
DATE OF BIRTH		GENDER		Religious affiliation				
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PLACE OF BIRTH	according	to travel	document	(for Aus	trian citizens a	also according t	o birth	
certificate)					ATT	•		
NATIONALITY						*		
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ZMR (central resid			per (if knò	wn)	7			
TRAVEL DOCUM								
Type, e.g. pass	port, ident			date	e of issuance:			
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REGISTRATION	Street (pl		House	number			artment	
of the following	square) c				building, staircase	number		
address	address name if w				stalicase	1		
	Postal co		City/to	City/town, province				
Is this address yo				yes ≅	no ≅			
If no, main	House number   Apartment   Door/apartment							
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		or town vithout	riodse na	minei			umenu	
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