



APPLICATION FOR VISA
Royal Thai Consulate-General

700 N. Rush Street, Chicago, Illinois 60611
Tel.(312) 664-3129 Fax.(312) 664-3230
consulate_visa@yahoo.com www.thaichicago.net

Please Indicate Type of Visa Requested

- Diplomatic Visa
- Official Visa
- Courtesy Visa
- Non-Immigrant Visa
- Tourist Visa
- Transit Visa

Number of Entries Requested _____

Please attach
2 photographs
taken within
the last 6 months
(2x2 inches)

Mr. Mrs. Miss _____

First Name Middle Name Family Name (in BLOCK letters)

Former Name (if any) _____ Countries for which travel document is valid _____

Nationality _____

Nationality at Birth _____ Proposed Address in Thailand _____

Birth Place _____ Marital Status _____

Date of Birth _____ Name and Address of Local Guarantor _____

Type of Travel Document _____

No. _____ Issued at _____ Tel./Fax. _____

Date of Issue _____ Expiry Date _____ Name and Address of Guarantor in Thailand _____

Occupation (specify present position and name of employer) _____ Tel./Fax. _____

Current Address _____

_____ I hereby declare that I will not request any refund from my paid visa fee even if my application has been declined.

Tel. _____ E-mail _____ Signature _____ Date _____

Permanent Address (if different from above) _____

Tel. _____

Names, dates and places of birth of minor children (if accompanying) _____

Date of Arrival in Thailand _____

Traveling by _____

Flight No. or Vessel's name _____

Duration of Proposed Stay _____

Date of Previous Visit to Thailand _____

Purpose of Visit: Tourism Transit

Business Diplomatic/Official

Other (please specify) _____

Attention for Tourist and Transit Visas Applicants
I hereby declare that the purpose of my visit to Thailand is for pleasure or transit only and that in no case shall I engage myself in any profession or occupation while in the country.
Signature _____ **Date** _____

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Application/Reference No. _____
Visa No. _____
Type of Visa:
 Diplomatic Visa Official Visa Courtesy Visa
 Non-Immigrant Visa Tourist Visa Transit Visa
Category of Visa: _____
Number of Entries:
 Single Double Multiple ___ Entries
Date of Issue _____ Fee _____
Expiry Date _____
Documents Submitted _____
Authorized Signature and Seal _____