

This registration form must be completed pursuant the article R. 611-42 of Code of Entry and Stay of Aliens and of the Right of Asylum.

Booking Number .....

Arrival .....

Departure .....

### ABOUT YOU

**CIVILITY** Mr  Mrs  Miss

**FAMILY NAME**

**FIRST NAME**

**PERMANENT ADDRESS**

**COUNTRY**

**TOWN**

**POSTAL CODE**

**BIRTH PLACE**

**DATE OF BIRTH (DD/MM/YYYY)**

**NATIONALITY**

**CELL PHONE**

**EMAIL ADDRESS**

**DATE**

**SIGNATURE**

This information is mandatory and failing to provide this information will result in refusal of access to the room.  
For more information, please go to the bottom section of the form.

### ACCOMPANYING CHILDREN UNDER 15 YEARS

**CIVILITY** Mr  Miss

**FAMILY NAME**

**FIRST NAME**

**BIRTH PLACE**

**DATE OF BIRTH (DD/MM/YYYY)**

**NATIONALITY**

**CELL PHONE**

**EMAIL ADDRESS**

Please tick the box to confirm address of residence is same as above or fill-in in the following mandatory information as well:

Confirm address

**PERMANENT ADDRESS**

**COUNTRY**

**TOWN**

**POSTAL CODE**

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