

	H. M. Government of Gibraltar		
	Civil Status & Registration Office		
	EU NATIONAL CIVILIAN REGISTRATION CARD		
APPLICATION FOR DUPLICATE/RENEWAL			

PLEASE COMPLETE IN CAPITAL LETTERS

PLEASE STATE REASONS FOR APPLYING (Loss of Card, Change of Particulars, Renewal, etc.)			
SURNAME			
FORENAMES			
DATE OF BIRTH		EYE COLOUR	
NATIONALITY		HEIGHT (CM)	
ADDRESS			
(IN GIBALTAR)			
OCCUPATION			
EMPLOYER			
MARITAL STATUS		NAME OF SPOUSE	
CONTACT TEL/EMAIL			

CHECK THAT THE INFORMATION IS CORRECT BEFORE YOU SIGN. TO GIVE FALSE INFORMATION ON THIS FORM KNOWINGLY OR RECKLESSLY IS AN OFFENCE.

RECENT PHOTOGRAPH	SIGNATURE
<div></div>	<div></div>
	<p>Please sign within the box</p> <p>Applications for Persons aged Over 15 must be signed by the applicant.</p> <p>Applications for Persons aged Under 15 must be signed by Parent/Legal Guardian.</p> <p>Date: _____</p>

PLEASE BRING PASSPORT

We may pass information on this form (and on the card record that this application relates to) to other government organisations and law enforcement agencies in order to check your application and whenever a card issued as a result of this application is used.

FOR OFFICE USE ONLY:		
ISSUE DATE: _____	EXPIRY DATE: _____	B/S NO.: _____