## Please attach 2 PHOTOGRAPHS

2" X 2"

(Taken within 6 months)



Royal Thai Consulate General-LA 611 N. Larchmont Blvd., 2nd Floor • Los Angeles, CA 90004-1321 Tel. (323)962-9574 ext. 230 • www.thaiconsulatela.org

Please Indicate Type of Visa Requested
☐ Diplomatic Visa
☐ Official Visa
☐ Courtesy Visa
☐ Non-Immigrant Visa
☐ Tourist Visa
☐ Transit Visa
Number of Entries Requested

Monday - Friday Hours : **9.00 - 11.30 A.M.** 

☐ Mr. ☐ Mrs. ☐ Miss	
First Name Middle Name	Family Name (in BLOCK letters)
Former Name (if any)	Countries for which travel document is valid
Father's Name	
Nationality	Proposed Address in Thailand
Nationality at Birth	
Birth Place Marital Status	Name and Address of Local Guarantor
Date of Birth	
Type of Travel Document	
NoIssued 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
	I hereby declare that I will not request any refund from
Current address	my paid visa fee even if my application has been declined.
	SignatureDate
TelE-mail	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
Permanent address (if different from above)	myself in any profession or occupation while in the country.
	SignatureDate
Tel.	FOR OFFICE USE mfavisaform10092007
Names, dates and places of birth of minor children (if accompanying)	Application/Reference No
, , , , ,	Visa No
	Type of Visa:  ☐ Diplomatic Visa ☐ Official Visa ☐ Courtesy Visa
	☐ Non-Immigrant Visa ☐ Tourist Visa ☐ Transit Visa
Date of Arrival in Thailand	Category of Visa:
Traveling by	Number of Entries:  ☐ Single ☐ Double ☐ Multiple ☐ Entries
Flight No. or Vessel's name	Date of Issue Fee
Duration of Proposed Stay	Expiry Date
Date of Previous Visit to Thailand	Documents Submitted
Purpose of Visit: Tourism Transit Business Diplomatic/Official Other (please specify)	Authorized Signature and Seal