



CITIZEN REGISTRATION FORM

Primary Contact Details

First name	Surname/Family name	Other names
Gender (M/F)	Date of Birth	Place of Birth
Ghana passport number	Date of issue	Place of issue
Other Nationality:	Mailing Address	
Email address (use block letters)		Phone
Name & address of employer or business		
Profession/occupation	Position held	
Spouse: Yes /No (If yes, see below)	Number of dependents in NZ: (Complete dependents details section)	

Spouse Details (Please complete if spouse living in NZ)

First name	Surname/Family name	Other names
Gender (M/F)	Date of Birth	Place of Birth
Ghana passport number	Date of issue	Place of issue
Other Nationality (please specify)		Phone
Email address (Use block letters)		Profession/occupation
Name & address of employer or business		Position held

Dependents Details (Please complete for dependents in NZ)

Name	Date of Birth	Place of Birth	Gender (M/F)

Emergency contact in New Zealand

Name	Phone	Email
Address		Relationship

Emergency contact in Ghana

Name	Phone	Email
Address		Relationship

1. This information is collected on behalf of the Government of the Republic of Ghana as record of its citizens in New Zealand for consular purposes.
2. Notify the Consulate of any changes or permanent departure from New Zealand.

Signature

Date

OFFICE USE ONLY	REFERENCE
DATE RECEIVED	NUMBER INCLUDED