



EMBASSY OF LEBANON
TO
THE REPUBLIC OF INDIA



VISA APPLICATION FORM

GIVEN NAME: BANSAL		FAMILY NAME: RAW	
FATHER'S NAME: BALWINDER KUMAR		MOTHER'S NAME: NEELAM	
DATE OF BIRTH: 10/09/2011	PLACE OF BIRTH: JALANDHAR, PUNJAB	CURRENT NATIONALITY: INDIAN	OTHER NATIONALITY: N.A
GENDER: <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	MARITAL STATUS: <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOW	RELIGION: HINDU	
CONTACT NUMBER: 918528910186	PERMANENT ADDRESS: VILL. RADWALI PO. WURPUR. JALANDHAR PINDI 146012, PUNJAB, INDIA.		
EMAIL: INDIA TAEKWONDO	CURRENT ADDRESS: N.A		
DESIGNATION: ATHLETE	COMPANY NAME: INDIA TAEKWONDO	ADDRESS OF COMPANY/ EMPLOYER: 403, TIMMY ARCADE, MAIKWANA RD. NEAR MAROL NAKA, METRO STATION ANDHERI (EAST) - MUMBAI-400051	
TYPE OF TRAVEL DOCUMENT: <input checked="" type="checkbox"/> ORDINARY PASSPORT <input type="checkbox"/> DIPLOMATIC PASSPORT <input type="checkbox"/> OFFICIAL PASSPORT <input type="checkbox"/> SERVICE PASSPORT			
PASSPORT NO.: W3324415	DATE OF ISSUE: 21/09/2022	DATE OF EXPIRY: 20/09/2027	PLACE OF ISSUE: JALANDHAR
ADDRESS DURING YOUR STAY IN LEBANON: CLEMENCEAU STREET, BEIRUT CITY CENTER, BEIRUT, LEBANON-113-5202			
NAME OF REFERENCE IN LEBANON: DANIELA KELLO	ADDRESS OF REFERENCE IN LEBANON: SIN EL FIL - CUBIC CENTER 5th FLOOR - SECTION J		
RELATIONSHIP TO HOST IN LEBANON: SPORTS PERSON	CONTACT NUMBER: 9671464066		
MAIN PURPOSE(S) OF VISIT: <input checked="" type="checkbox"/> TOURISM <input type="checkbox"/> BUSINESS <input type="checkbox"/> MEDICAL <input type="checkbox"/> EDUCATION <input type="checkbox"/> OFFICIAL <input type="checkbox"/> FAMILY/ FRIENDS <input type="checkbox"/> TRANSIT EXPLAIN _____			
DATE OF ARRIVAL: 31/08/2023	DURATION OF STAY: 11 DAYS	ACCOMPANIED BY: N.A	
NUMBER OF ENTRIES: <input type="checkbox"/> SINGLE ENTRY <input type="checkbox"/> DOUBLE ENTRY <input type="checkbox"/> MULTIPLE ENTRY			
PREVIOUSLY VISITED LEBANON: <input type="checkbox"/> NO <input type="checkbox"/> YES - IF YES, WHEN (DD/MM/YYYY) _____ N.A			
ENTERING LEBANON: <input type="checkbox"/> BY AIR <input type="checkbox"/> BY LAND <input type="checkbox"/> BY SEA			

*My signature engages my responsibility and subjects me to penalties specified by law in the event of giving a wrong declaration.
*I hereby agree not to undertake any work in Lebanon of any kind paid or unpaid.

DATE: ___/___/___

SIGNATURE: **Balwinder Kumar**
NEELAM

FOR OFFICIAL USE ONLY		FEES COLLECTED	
VISA NO.: _____	DATE OF ISSUE: _____	<input type="checkbox"/> 6600 RS	<input type="checkbox"/> 131250 LL
VISA TYPE: <input type="checkbox"/> TOURIST <input type="checkbox"/> BUSINESS <input type="checkbox"/> DIPLOMATIC <input type="checkbox"/> OFFICIAL		<input type="checkbox"/> 9400 RS	<input type="checkbox"/> 187500 LL
NUMBER OF ENTRIES: <input type="checkbox"/> SINGLE <input type="checkbox"/> DOUBLE <input type="checkbox"/> MULTIPLE		<input type="checkbox"/> 13150 RS	<input type="checkbox"/> 262500 LL
DURATION OF STAY: <input type="checkbox"/> 15 DAYS <input type="checkbox"/> 1 MONTH <input type="checkbox"/> 3 MONTHS <input type="checkbox"/> 6 MONTHS		RECEIPT: _____	

IMPORTANT: "IT IS MANDATORY TO PROVIDE ALL THE REQUIRED INFORMATIONS, LEAVING OUT ANY INFO WILL RISK REJECTING THE APPLICATION"

For further informations please visit us on [Embassy of Lebanon in New Delhi \(@embassy.of.lebanon.in.india\)](https://www.embassyoflebanon.in)
[Embassy of Lebanon, India \(@embassy_lebanon\)](https://www.embassyoflebanon.in)
www.embassyoflebanon.in