Ministry of Foreign Affairs
Embassy of the Kingdom of Bahrain
Consular Division
Tel: 202-342 1111
Fax: 202-362-2192
3502 International Drive N.W.
Washington D.C. 20008
e-mail: consulate@bahrainembassy.org

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2" x 2"

VISA APPLICATION FORM

First Name _____ Middle _____ Last _____

Occupation _____ Gender: Male ☐ Female ☐

Date of Birth (mm/dd/yy) _____ Place of Birth _____

Passport Number _____ Place of Issue _____

Issue Date _____ Expiry Date _____

Address in the USA: _____

City _____ State _____ Zip Code _____

Telephone _____ Cell _____ Fax _____

E-mail _____

Social Security No *(if applicable)* _____

Reason for traveling to Bahrain _____ Duration of proposed visit _____

Address in Bahrain _____ Date of Arrival _____

References and address of sponsor in Bahrain _____

Name of family (wife & children) accompanying applicant *(each applicant must apply individually)* _____

Duration of previous residence and address when last in Bahrain _____

Attach a letter from authority which recommends granting the required visa
(For Official or Diplomatic Visas Only)

Attach a letter stating the purpose and duration of the visit and the applicant's responsibility for all travel expenses

I hereby declare the details and information given in this application are true and correct.

Place _____ Date _____ Signature _____

Print, complete and mail by overnight FedEx, with your passport and application fee, to:
EMBASSY OF THE KINGDOM OF BAHRAIN, Consular Division,
3502 International Drive, N.W. Washington D.C. 20008