

## REGISTRATION FORM FAMILY

<b>New adress in Dornach / street</b>	<b>Number</b>	<b>Floor</b>	<b>Number of rooms</b>
<input type="checkbox"/> room tenant	<input type="checkbox"/> housing/apartment tenant	<input type="checkbox"/> owner of house/apartment	
c/o Adresse:			

<b>Date of arrival in Dornach</b>	
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<b>Person 1</b>		<b>Spouse</b>	
Name		Name	
First name		First name	
Name before marriage		Name before marriage	
Date of birth		Date of birth	
Place of birth		Place of birth	
Nationality		Nationality	
<input type="checkbox"/> employed	<input type="checkbox"/> self-employed	<input type="checkbox"/> employed	<input type="checkbox"/> self-employed
<input type="checkbox"/> education / internship / apprenticeship		<input type="checkbox"/> education / internship / apprenticeship	

<b>Civil status</b>		
<input type="checkbox"/> single	Date	
<input type="checkbox"/> married	since:	
<input type="checkbox"/> divorced	since:	
<input type="checkbox"/> widowed	since:	
<input type="checkbox"/> <i>separated:</i>	<i>since:</i>	
<input type="checkbox"/> <i>separate residence (temporarily)</i>	<i>since:</i>	<i>With / from name and adress</i>
<input type="checkbox"/> <i>judicially separated</i>	<i>since:</i>	



Religion		Religion of spouse	
<input type="checkbox"/> protestant	since birth <input type="checkbox"/>	<input type="checkbox"/> protestant	since birth <input type="checkbox"/>
<input type="checkbox"/> roman-catholic		<input type="checkbox"/> roman-catholic	
<input type="checkbox"/> christian-catholic		<input type="checkbox"/> christian-catholic	
<input type="checkbox"/> other	Registration since:	<input type="checkbox"/> other	Registration since:

Health insurance		Health insurance	
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<b>Is your spouse (abroad) employed?</b> (non-working spouse and their minors abroad must have an health insurance in Switzerland)	<input type="checkbox"/> yes <input type="checkbox"/> no
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Minor children (only if they live in Dornach)			
Name		Name	
First name		First name	
Date of birth		Date of birth	
Religion		Religion	
Health insurance		Health insurance	
Owner custody	<input type="checkbox"/> Mother <input type="checkbox"/> Father	Owner custody	<input type="checkbox"/> Mother <input type="checkbox"/> Father

Name		Name	
First name		First name	
Date of birth		Date of birth	
Religion		Religion	
Health insurance		Health insurance	
Owner custody	<input type="checkbox"/> Mother <input type="checkbox"/> Father	Owner custody	<input type="checkbox"/> Mother <input type="checkbox"/> Father

Last address (town)	
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Do you have a dog?	<input type="checkbox"/> yes	<input type="checkbox"/> no
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Existence of guardianship?	<input type="checkbox"/> yes	<input type="checkbox"/> no
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<b>Phone number</b>	<b>Email</b>
<b>Remarks</b>	
<b>Date</b>	
<b>Signature</b>	<b>Signature spouse</b>
With my signature I certify the correctness of the above-mentioned personal data.	

## CHECKLIST REGISTRATION

Foreigners, which are coming to Switzerland the <u>first time</u>	Foreigners, which are coming from Switzerland	Swiss citizen
<input type="checkbox"/> passport or identity card	<input type="checkbox"/> passport or identity card	<input type="checkbox"/> Confirmation deregistration
<input type="checkbox"/> Contract of employment or student certificate	<input type="checkbox"/> Residence permit	<input type="checkbox"/> passport or identity card
<input type="checkbox"/> Copy of tenancy agreement	<input type="checkbox"/> Copy of tenancy agreement	<input type="checkbox"/> Copy of tenancy agreement
<input type="checkbox"/> Proof of the Swiss health insurance	<input type="checkbox"/> Proof of the Swiss health insurance	<input type="checkbox"/> Proof of the Swiss health insurance
<input type="checkbox"/> Proof of solvency (if no contract of employment)	<input type="checkbox"/> Contract of employment (L+B Permit) or student certificate)	<input type="checkbox"/> With children: Birth certificate
<input type="checkbox"/> Proof of civil status (marriage certificate, divorce decree)	<input type="checkbox"/> Proof of civil status (marriage certificate, divorce decree)	<input type="checkbox"/> Custody decision by divorced or non-married parents
<input type="checkbox"/> Birth certificate	<input type="checkbox"/> Birth certificate	<input type="checkbox"/> Consent form for movement of children when married parents live separately
<input type="checkbox"/> Custody decision by divorced or non-married parents	<input type="checkbox"/> Custody decision by divorced or non-married parents	
<input type="checkbox"/> Consent form for movement of children when married parents live separately	<input type="checkbox"/> Consent form for movement of children when married parents live separately	
<input type="checkbox"/> Stay request for not working people from EU/EFTA or third countries	<input type="checkbox"/> Form „Coming from another country“ (only for third countries)	
<input type="checkbox"/> Family immigration application		
<input type="checkbox"/> Application for residence for non-employed persons EU/EFTA or third states		

