Registration Form (Riyadh): *May 1, 2006*

EMBASSY OF THE UNITED STATES OF AMERICA
Riyadh, Saudi Arabia

U.S. CITIZEN REGISTRATION APPLICATION

CONSULAR SECTION
P.O. Box 94309, Riyadh 11693, Saudi Arabia
Tel: 01-488-3800 Fax:01-483-0773
Email: RegistrationRID@state.gov Website: http://riyadh.usembassy.gov

PLEASE INDICATE
ESTIMATED DEPARTURE DATE FROM SAUDI ARABIA

Month: Year:

FULL NAME :
(Last, First, Middle)

ALIAS :
(i.e. Maiden Name)

SEX: ☐ **M** ☐ **F**

DATE OF BIRTH :
(Day, Month, Year)

PLACE OF BIRTH :
(City, State, Country)

U.S. PASSPORT NUMBER :

PLACE OF ISSUE :

(PLEASE ATTACH COPY OF PASSPORT BIODATA PAGE)

DATE OF ISSUE :

DATE OF EXPIRATION:

SSN:

SAUDI WORK ADDRESS :
(Company, Department, P.O. Box, City, ZipCode)

SAUDI HOME ADDRESS :
(Compound or District of Residence, City)

HOME PHONE : **WORK PHONE :** **FAX :**

E-MAIL **CELLULAR :**

EMERGENCY CONTACT: *(Outside Saudi Arabia)*

NAME: **RELATIONSHIP:**

ADDRESS :

HOME PHONE: **WORK PHONE:** **E-MAIL:**

PRIVACY ACT STATEMENT

The information requested on this from is solicited pursuant to Section 2658 of Title 22 of the United States Code, Section 71.1 of Title 22 of the Code of Federal Regulations and Executive Order 11295 of August 5, 1966. The principal purpose for this information is to create an official record of United States citizenship which will enable consular and diplomatic officers to furnish promptly and efficiently all services which are the inherent right and privilege of such citizenship. Specific purposes for the collection of this information include: establishment of citizenship, establishment of entitlement to a US passport, issuance of Report of Birth to citizens' children born abroad, dissemination of information concerning nationality laws that might affect the nationality status of the registrant, establishment of entitlement to services consistent with US citizenship in the event of the registrant's death, and protection of and assistance to US citizens abroad, particularly in emergency situations. The information is made available on a need-to-know basis to personnel of the Department of State and as a routine use to other government agencies having statutory or other lawful authority to maintain such information in the performance of their official duties, and to wardens designated by consular officials at US embassies or other foreign service posts.
Furnishing the information on this form is voluntary, but failure to do so may preclude or impair US Government officials or other designated representatives from providing the services described in the first paragraph of this statement.

In accordance with the privacy act statement, I hereby authorize the U.S. Department of State to release this information: **YES** ☐ **NO** ☐

If yes, please check to whom we may release it: **Family** ☐ **Media** ☐ **Congress** ☐ **Other** ☐

Signature: ***Date:***

FAMILY INFORMATION

(Residing in Saudi Arabia)

SPOUSE:

FULL NAME :
(Last, First, Middle)

ALIAS :
(i.e. Maiden Name)

SEX: ☐ **M** ☐ **F**

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SSN:

SAUDI WORK ADDRESS :
(Company, Department, P.O. Box, City, ZipCode)

CHILD (1):

FULL NAME :
(Last, First, Middle)

ALIAS :

SEX: ☐ **M** ☐ **F**

DATE OF BIRTH :
(Day, Month, Year)

PLACE OF BIRTH :
(City, State, Country)

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DATE OF ISSUE

DATE OF EXPIRATION

SSN:

CHILD (2):

FULL NAME :
(Last, First, Middle)

ALIAS :

SEX: ☐ **M** ☐ **F**

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(City, State, Country)

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To hear a recording of the most recent security information, you may call the Embassy in Riyadh at 01-488-3800 and press **6** for "Regional or Worldwide Security Advisory" and press **7** for "Security Advisory for Saudi Arabia". You can also review the latest security information via the Internet at http://riyadh.usembassy.gov/wwwhsecu.html.