

Please take notice of the instructions for filling out the form!				The following informations are required subject to sect. 13, 15, 17 and 18 of the Registration Laws.				Daily stamp of the registry office			
APPLICATION for registration -								<u>Please print the German form below!</u>			
Date of move/relocation		Day	Month	Year	Gemeindeschlüssel		Gemeindeschlüssel				
					09.1.62.000						
New residence (street/place, number, floor)						previous residence (street/place, number, floor)					
(ZIP/Postal code) (town, community) München						(ZIP/Postal code, town/community; if in a foreign country incl. state, province)					
The new residence in Germany is the only residence main residence second residence						If you intend to keep your previous main residence in Germany or if you have any other residences here, please fill out the additional for "registration of several residences"					
to fill out only if you are moving from abroad: last residence in Germany (postal code, town, street/place, number)											
Pos.	Surname/last name				Earlier names/maiden name/name of birth				First name(s)		
1											
2											
3											
4											
Pos.	Academic title	Marital status	Gender		Date of birth	Place of birth (county, state; if in a foreign country: incl. country)					
1			M	F							
2			M	F							
3			M	F							
4			M	F							
Pos.	Nationality(ies)				Religion		Date and place of marriage/civil partnership				
1											
2											
3											
4											
Pos.	Do you need an income tax card?		Tax bracket	Legal status of the registered children			Informations about your husband/wife or life partner, who does not move in with you				
				to the father to the mother			Surname/Last name Date of birth				
1	no	yes									
2	no	yes					First name Religion				
3	no	yes					Address (street/place, number, postal code, town, community)				
4	no	yes					(Postal code, town, community)				
Identity informations											
Pos.	Description		Issuing authority			Date of issue	Date of Expiry	For refugees/displaced persons: residence on 1st Sept. 1939 (town, country, province)			
1											
2											
3											
4											
Legal representative (first name, surname, academic title, date of birth, address)											
Regarding your rights to protest against the transfer of private information in certain cases, please read attached application instructions.											
Place, date						Applicant's signature					

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(ZIP/Postal code) (town, community)				(ZIP/Postal code, town/community; if in a foreign country incl. state, province)	
München					
The new residence in Germany is <input checked="" type="checkbox"/> the only residence <input type="checkbox"/> main residence <input type="checkbox"/> second residence				If you intend to keep your previous main residence in Germany or if you have any other residences here, please fill out the additional for "registration of several residences"	
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Pos.	Surname/last name		Earlier names/maiden name/name of birth		First name(s)
1					
2					
3					
4					
Pos.	Academic title	Marital status	Gender	Date of birth	Place of birth (county, state; if in a foreign country: incl. country)
1			<input type="checkbox"/> M <input type="checkbox"/> F		
2			<input type="checkbox"/> M <input type="checkbox"/> F		Martial status: LD = single, VH = married, GS = divorced,
3			<input type="checkbox"/> M <input type="checkbox"/> F		VW = widowed
4			<input type="checkbox"/> M <input type="checkbox"/> F		
Pos.	Nationality(ies)		Religion	Date and place of marriage/civil partnership	
1					
2				Religions: EV = evangelic, RF =reformed, RK = roman catholic	
3				AK = old catholic, IS = israelit, VD = miscellaneous	
4					
Pos.	Do you need an income tax card?	Tax bracket	Legal status of the registered children		Informations about your husband/wife or lifepartner, who does not move in with you
1	<input checked="" type="checkbox"/> no <input type="checkbox"/> yes		to the father	to the mother	Surname/Last name Date of birth
2	<input type="checkbox"/> no <input type="checkbox"/> yes				First name Religion
3	<input type="checkbox"/> no <input type="checkbox"/> yes				Address (street/place, number, postal code, town,community)
4	<input type="checkbox"/> no <input type="checkbox"/> yes				(Postal code, town,community)
Identity informations					For refugees/displaced persons: residence on 1st Sept. 1939 (town, country, province)
Pos.	Description	Issuing authority	Date of issue	Date of Expiry	
1	Personalausweis = ID Card				
2	Reisepass = passport				
3	Kinderalausweis = child's ID Card				
4	Kinderreisepass = child's passpor				
Legal representative (first name, surname, academic title, date of birth, address)					
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