## **APPLICATION FOR HOLIDAY VISITOR**

**IMPORTANT NOTE FOR SPONSORS-** A minimum of 5 working days' notice is required for applications to be processed in time. Sponsor and visitor must attend the pass office together to collect pass. The Head of Establishment retains the right to refuse or revoke access to any individual without prior notice or warning. It is the responsibility of the sponsor to ensure that their visitor(s) has fully complied with the most current Covid policies from the UK or the Government for which they reside and the receiving Government of the ROC.

| Title | Forename(s) | Surname | Date of Birth | Place of Birth | Relationship<br>to Sponsor | Nationality | Passport No |  |
|-------|-------------|---------|---------------|----------------|----------------------------|-------------|-------------|--|
|       |             |         |               |                |                            |             |             |  |
|       |             |         |               |                |                            |             |             |  |
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Children aged 11 and under do not require a pass, only visitors aged 12 and over should be annotated on this list.

## \*\*Visitors are advised to take out Private health insurance, the EU Health card may not cover the private clinic which the MoD Uses in Cyprus\*\*

All visitors without a Dependent Status Stamp must be in possession of a European Health Insurance Card (EHIC) or its post-EU Transition successor. Visitors will be personally liable for the costs of non-emergency care and are urged, therefore, to take out private/travel health insurance for the duration of their stay\*

## Part 2- Visit details

Part 1. Visitor's datails

| Arrival Date | Departure Date | Sponsors Home Address | Visitors Home Address |
|--------------|----------------|-----------------------|-----------------------|
|              |                |                       |                       |
|              |                |                       |                       |
|              |                |                       |                       |

## Part 3- Sponsors details

| Rank | Full Name | Service Number | Unit | Tourex | Contact No |
|------|-----------|----------------|------|--------|------------|
|      |           |                |      |        |            |

I certify that I am entitled to sponsor the applicant in accordance with BFC Standing Orders Chapter 4, Section 3.

I understand that it is my responsibility to ensure the applicant is aware that their pass allows them access to my SFA and unit retail establishments only, and there is no access to military buildings allowed.

I understand that it is my responsibility to recover the pass(es) from the holder(s) and return them to the pass office when no longer required.

IMPORTANT: In accordance with GDPR 2018, the Ministry of Defence will collect, use, protect and retain the information on this form for exercising rights and obligations in connection with employment including the production of management stats only, which will be collected centrally. If you have any concerns you should advise the Sy Flt accordingly.

Send to BFC-AKI-SyFlt-Holivisit@mod.gov.uk