

## REGISTRATION FORM



● TO BE FILLED BY TRAVELLER IN CAPITAL LETTERS

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FIRST NAME	MIDDLE NAME	LAST NAME
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AGE: \_\_\_\_\_ GENDER:  MALE  FEMALE

MOBILE NUMBER: \_\_\_\_\_ MOBILE NO. BELONGS TO:  SELF  RELATIVE

EMAIL ID: \_\_\_\_\_

PASSPORT NUMBER: \_\_\_\_\_ NATIONALITY: \_\_\_\_\_

COMPLETE DESTINATION ADDRESS: \_\_\_\_\_

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VILLAGE/TOWN/LOCALITY: \_\_\_\_\_ TALUKA: \_\_\_\_\_

DISTRICT: \_\_\_\_\_ STATE: \_\_\_\_\_

SYMPTOMATIC:  YES  NO VACCINATED (BOTH DOSES):  YES  NO

AIRLINE (ORGANISATION): \_\_\_\_\_

Kindly whatsapp your feedback to 9145150120 or email [laboratory@victorhospital.com](mailto:laboratory@victorhospital.com)

**RT-PCR Centres accross Goa:** Victor Hospital, Margao | Miramar Residency Yatri Niwas, Panaji | Dr Olavo Ribeiro Hospital, Mapusa | Dr Dukle Hospital, Candolim | Pai Hospital, Vaddem Vasco | Rutuja Clinic, Upper Bazar Ponda.  
To book RT-PCR test call 7720098138 or login <http://victorhospital.com/covid19/>