



INSTITUT LUXEMBOURGEOIS DE RÉGLATION

RADIO AMATEUR LICENSE

APPLICATION FORM TO OBTAIN A LUXEMBOURG RADIO-AMATEUR LICENSE ACCORDING TO THE RECIPROCAL ARRANGEMENT BETWEEN THAILAND AND LUXEMBOURG.

Name and Given Names		
Place and date of birth		
Postal address in Thailand		
Period of the stay in Luxembourg	from.....to.....	
Postal address during the stay in Luxembourg		
Phone numbers, E-mail addresses		

Please join the following documents:

- *certified copy of the Thailand radioamateur license.*
- *certified copy of the passport.*

Place and date :

.....

signature