

CONTACT INFORMATION SHEET

Information obtained through this form is confidential and is used in accordance with the provisions of Canada's Privacy Act.

Your personal identification

Full name: _____

Date and place of birth: _____
dd/mm/yyyy *location*

Passport information: _____
number *dd/mm/yyyy*

Do you have another nationality
other than Canadian? yes _____ no
nationality

Prisoner number: _____

Your consular representative in the country

Full name: _____
full name of consular representative

Title: _____
title of consular representative

Telephone and fax numbers: _____
telephone *fax*

E-mail: _____

Your legal representative

Full name: _____
full name of lawyer/legal representative

Address: _____
street address, city

province/state, country

Telephone and fax numbers: _____
telephone *fax*

E-mail: _____

Prison contact information

Name: _____
name of prison/detention centre

Address: _____
street address, city

province/state, country

Telephone and fax numbers: _____
telephone *fax*

E-mail: _____