**Affidavit of Relationship**

This affidavit is made by the following person, who by his/her signature confirms the accuracy of the following information:

Name and surname: …………………………………………………………………………..

Date of birth: ………………………………………………………………………………….

Permanent address: ……………………………………………………………………………

E-mail: ………….……………………………….. Phone number: ………………………….

I hereby declare that I am in a permanent relationship and share a common household with the following person

Partner’s name and surname: ………...……………………………………………………..…..

Partner’s date of birth: ……………..……………………………………………………………

Partner’s nationality: ……………………………………………………………………………

Partner’s travel document number: ..……………………………………………………………

and that I wish for my partner to be allowed entry to the Czech Republic. We will stay together at this address: …………………………………………………………………………………..

I attach the following documents as a proof of our relationship:

……………………………………………………………….

……………………………………………………………….

……………………………………………………………….

Their scans are attached to this affidavit.

I hereby pledge to provide my partner with:

* accommodation at the above stated address for the entire period of his/her stay in the Czech Republic, incl. a place of stay where quarantine measures will be carried out in the case it has been ordered by a public health authority,
  + address for quarantine if different from the address of residence ………………………………………….………………………………………..
* health care or health services provider for the entire period of his/her stay in the Czech Republic, including medical costs coverage, unless provided otherwise,
* assistance with his/her return to the country of origin in case of termination of the purpose of stay in the Czech Republic.

I further declare that the information contained in this affidavit is complete, true and undistorted and that I am aware of the legal consequences of their untruthfulness, incompleteness or distortion. I am also aware of any criminal or administrative liability, especially pursuant to the Act No. 250/2016 Coll., on Liability for Misdemeanors and Proceedings concerning them, and Act No. 40/2009 Coll., the Criminal Code.

In ………………… date ………………. ……………………………………

Name and Signature