

Cheat Sheet – Barbados

There are two forms to complete ahead of travel via Barbados, please see guidelines on how to complete below.

1. Barbados Pre-Arrival Registration Form

- We recommend you complete this on a computer as opposed to iPhone or iPad.

BARBADOS IMMIGRATION ARRIVAL FORM

- Complete fields Last Name, Given Name(s) and Date of Birth exactly as written in your travel document.
- Embarkation is where traveller departed from.
- A Traveller without a Zip or Postal Code should use '00000' as a default code.

PRIMARY TRAVELLER

How are you entering Barbados?
 AIR SEA

Please add all your personal details in the form below. This must be completed for all passengers travel through or into Barbados.

1 Flight/Vessel Information:

Airline *
BRITISH AIRWAYS

Country of Embarkation *
UNITED KINGDOM

Port of Embarkation *
HEATHROW AIRPORT

Flight/Registration Number *
BA

Intended Date of Arrival *
30/10/2021

2 Personal Information:

Last Name *
CUNNINGHAM

Given Name(s) *
ALICE

Gender *
FEMALE

Country of Birth *
UNITED KINGDOM

Date of Birth *
14/06/1988

Nationality (Country) *
UNITED KINGDOM

Country of Residence *
UNITED KINGDOM

Zip/Postal Code *
SW1E

3 Travel Information:

Travel Document Type *
PASSPORT

Travel Document Number *
123456789

Travel Document Expiry Date *
10/02/2027

Country of Issue *
UNITED KINGDOM

Upload Biometric Page of Passport *
Passport 2020 .jpg

View Biometric Image

Over the past 21 days, have you visited or been in contact with anyone from the following countries? Please select.

Countries *
None of the listed countries

4 Destination Information:

Purpose of Visit *
INTRANSIT PASSENGER

Length of Stay in Barbados *
0

Accommodation Type *
NOT REQUIRED (comes in and leaves same day)

Parish *
NOT APPLICABLE

- Select 'in-transit passenger'
- Accommodation type is not required
- Parish not applicable
- Length of stay is 0

5 Contact Information:

+442072016831

Email Address *
alice@mustique.vc

Confirm Email Address †
alice@mustique.vc

I'm not a robot

CANCEL

Add Family Members

Are you travelling with your spouse or children under the age of 18?

Select none or number of additional family members:

None

Cancel Submit

The form will then ask you to add minors under 18. If you do not need to do this select "None"

BARBADOS PASSENGER CUSTOMS DECLARATION

Form C23 (Regulation 83)

Please answer the following for yourself, on behalf of your spouse and/or children under the age of 18.

How many pieces of checked and hand luggage is the travel party bringing into Barbados?

Total Pieces of Luggage *

2

I am (We are) bringing fruits, plants, cut flowers, vegetables, soil, meat, live animals and organisms, honey, wildlife products, plant material, food, animal products or live birds.

- Yes
 No

I am (We are) bringing pharmaceuticals.

- Yes
 No

I am (We are) bringing narcotics and other illicit drugs, biological substances, arms, ammunition, explosives, fireworks, toy guns or other weapons.

- Yes
 No

I have (We have) commercial merchandise: (e.g. articles for sale, samples used for soliciting orders or goods that are not considered personal effects)

- Yes
 No

I am (We are) carrying currency or monetary instruments over BDS\$ 10,000 or equivalent.

- Yes
 No

Citizens and Residents 18 years and older are exempted from duty on goods of a value not exceeding BDS\$ 500.00 per Calendar year. Have you claimed any such exemption in this year?

- Yes
 No

All passengers 18 years and over may bring with them: Wine or spirits not exceeding 1 litre.

Personal effects i.e. wearing apparel, articles of personal adornment, toilet requisites and any portable articles in a passenger's baggage or on his/her person which he/she might reasonably be expected to carry with him/her for his/her own regular and private use, and which are so declared.

- Ensure you have answered all questions then press submit. as

CANCEL SUBMIT

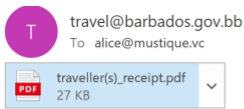
Your information has been submitted.

The confirmation receipt has been sent to:
alice@mustique.vc

You must log in to your email to access the confirmation receipt.

[GO TO HOMEPAGE](#)

- When submitted you will see this message on your screen.
- You will then receive an email from the authorities with your PDF receipt (see below)



PRIMARY TRAVELLER
FIRST NAME: ALICE
LAST NAME: CUNNINGHAM
TRAVEL CODE: 14A0912DAE5D0

Dear Traveller,

You're one step closer to the sunny beaches of Barbados!

Be sure to download and save the attached travel receipt for your records. You'll need to present it to the Barbados Immigration and Customs when you arrive.

NB. The Barbados Government has been experiencing glitches in their website and have advised that once submitted that if you do not receive an email confirmation within an hour, please recomplete the form and submit again and try a different browser.

2a. Barbados Passenger Arrival Form – for in-transit passengers (for passengers who are overnighting jump to form B)



PASSENGER ARRIVAL INFORMATION

NAME: ALICE CUNNINGHAM

AGE: 33 GENI

ADDRESS WHERE TRAVELLING FROM: ADD YOUR HOME AD

LOCAL ADDRESS: NOT APPLICABLE

LENGTH OF STAY: NOT APPLICABLE

CONTACT NO: ADD YOUR PERSONAL PHONE NUM

- This form needs to be manually completed.
- Address from where you are travelling from is your home address.
- Local Address and Length of stay at Not Applicable
- Add your personal phone number
- Sign and print for all passengers and travel with hard copy

SIGNATURE: _____

DATE: USE DATE OF TRAVEL

2.b Barbados Quarantine/Monitoring Form – for passengers overnighing in Barbados only

BARBADOS MINISTRY OF HEALTH AND WELLNESS
QUARANTINE / MONITORING CONSENT FORM
 The Health Services Regulations, 1969
 Form to be completed per traveller



Name of Traveller
 ALICE CUNNINGHAM Age: 33 Test Date: 28.10.21
 Age: Test Date:
 Age: Test Date:
 Age: Test Date:

Resident Visitor - Stay: 2 days In-Transit - Stay: ____ hours

Home Address
 ADD YOUR HOME ADDRESS
 Contact Number: +44 xxxxxx
 Email Address:

Monitoring/Quarantine Address in Barbados
 ADD YOUR HOTEL DETAILS IN BARBADOS
 Contact Number:

Under authority of Quarantine Act, CAP. 53, the Ministry of Health and Wellness has reason to believe that you may have been exposed to COVID-19 and that you may pose a risk to the health and safety of others.

Declaration

Have you been in or travelled through a country currently classified as High Risk in the last 21 days?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Have you been in or travelled through a country currently classified as Medium Risk in the last 21 days?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

If Yes, please state countries: N/A

I hereby confirm that the information I have given is accurate. I also understand that, depending on my **Assigned Risk status**, I will either be **monitored** or **quarantined** at an approved location for a period as determined by the last day of possible exposure and the incubation period of the disease. I further understand that I must self-assess twice daily and submit these results to the MHW Surveillance Team.


 Signature of Traveller
 27.10.21
 Date

For Official Use

Assigned Risk
 High Risk
 Medium Risk
 Low Risk

For Chief Medical Officer

Please see additional information on reverse side.

- This form needs to be manually completed.
- Address from where you are travelling from is your home address.
- Local Address is your Barbados accommodation
- Add your personal phone number
- Declaration – tick No in both boxes unless coming from High-Risk countries (Brazil, South Africa and India)
- Sign and print for all passengers and travel with hard copy