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JAN 14 2009

# DEPARTMENT OF DREAMLAND SECURITY IMMIGRATION FORM WXRZYQ SFG 23587-492 A

Approved:GRH1378-00-69 Expires:Next Life. Estimated Burden:12,6% of Brain. 2 Pages.

PLEASE TYPE OR PRINT YOUR ANSWERS IN THE SPACE PROVIDED BELOW EACH ITEM

1. Passport Number [REDACTED]	2. Physical Date of Birth (dd-mm-yyyy) [REDACTED]	3. Mental Date of Birth (dd-mm-yyyy) [REDACTED]	4. Forever Young? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	DO NOT WRITE IN THIS SPACE WXR-1/DGF-2/QAB1-2/RWT-3 Other _____ Max Visa Classification _____ Multi _____ Number of Applications _____ Months _____ Validity _____ Issued/Refused _____ On _____ By _____ Under 356(a) 429(g) 572(c) Other _____ Reviewed by _____ Nonsense _____ BlahBlah _____
5. Hometown [REDACTED]	6. Country/State/Province/Planet [REDACTED]	7. Nationality [REDACTED]		
8. First, Middle, and Surnames (As in Passport) [REDACTED]				
9. Other Surnames, Aliases, Pseudonyms, Acronyms, Hidden Personalities and Illegal Identities [REDACTED]				
10. List of Personal Heroes (As in Passport) [REDACTED]				
11. What would you like to be when (ever) grow up? GARDENER	12. And what would you never want to be? ARTIST			
13. Place of Birth [REDACTED]	14. Present Occupation [REDACTED]	15. What Occupies Your Brain? QUESTIONS ABOUT PLASMA		
16. Sex <input type="checkbox"/> Male <input type="checkbox"/> Trans <input type="checkbox"/> Other, Specify _____ <input type="checkbox"/> Female <input checked="" type="checkbox"/> Alien	17. Home Address (Include Apartment Number, Street, City, State, Zip Code, Country and Complaints About Neighbours) [REDACTED]			
18. Home Telephone Number [REDACTED]	19. Business Telephone Number [REDACTED]	20. Number Where Reachable When Dreaming [REDACTED]		
21. Email Address [REDACTED]	22. Telepathic Contact Info [REDACTED]	23. Non-Verbal Communication License No. [REDACTED]		
24. Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single (Never Married) <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> No Idea	25. When Do You Intend to Enter Your Own DreamWorld (Provide Specific Date if known) [REDACTED]	26. Yes <input type="checkbox"/> No		
27. What Do You Believe in? (Check all Boxes that Apply to your Personal or Imaginary Situation) <input type="checkbox"/> Reality <input type="checkbox"/> Nothing <input checked="" type="checkbox"/> Fantasy <input type="checkbox"/> Love <input type="checkbox"/> Fear <input type="checkbox"/> Optimism <input type="checkbox"/> Other, Specify: _____ <input type="checkbox"/> Utopia <input type="checkbox"/> Hell <input type="checkbox"/> Heaven <input type="checkbox"/> A Better Place <input type="checkbox"/> Dreams <input type="checkbox"/> Hope				
28. Methods of Bribing <input type="checkbox"/> Monetary <input checked="" type="checkbox"/> Imaginary <input type="checkbox"/> Other, Specify _____		29. Entering Dreamworld <input type="checkbox"/> Permanently <input type="checkbox"/> Temporary <input type="checkbox"/> Other, specify: _____		
30. Dream Address (Include Sleep Code, Imaginary Country and other Brainwaves) [REDACTED]				
31. What Do You Intend to do while Living in Your Own DreamWorld? [REDACTED] RENOUNCE GOD			 DREAM IN THIS SPACE 0 mm 0 Photo Here 54732	
32. Contact Person in Your DreamWorld [REDACTED]	33. Occupation in Your DreamWorld COMEDIAN			
34. How Long Do You Intend to Stay in Your DreamWorld? [REDACTED]	35. Describe Utopia: [REDACTED] Does Utopia Exist? <input checked="" type="checkbox"/> Yes			
36. Who Will Pay for Your Dreams? [REDACTED] Why? _____	37. Have You Ever Lived in Your DreamWorld Before? <input type="checkbox"/> No <input type="checkbox"/> Yes, When? [REDACTED] For How Long? 40 YEARS			