

Annex I

Registration Form

**Sixth Session of the Assembly of Parties
2 - 4 October 2017
Sharm El Sheikh, Egypt**

Country/ organization			
Agency or organization			
Visa needed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Family name (exactly as it appears on passport)			
Given name (s) (exactly as it appears on passport)			
Passport	Type:No:.....		
Date of Birth (DD/MM/YY)			
Gender			
Nationality			
Title/Function			
Telephone		Facsimile	
E-mail			

Accommodation during your stay in Sharm El Sheikh, Egypt	Hotel Savoy	<input type="checkbox"/>
	Hotel Royal Savoy	<input type="checkbox"/>
	Hotel Sierra	<input type="checkbox"/>
	Other (please indicate):	<input type="checkbox"/>

FLIGHT DETAILS			
Arrival date		Flight No.	
Arrival time		Airline	
Departure date		Flight No.	
Departure time		Airline	

Please use a separate form for each participant.

Please e-mail this registration form to IACA's Secretariat (assembly2017@iaca.int) at your earliest convenience, preferably not later than 15 September 2017.