

**COM CO-ORDINATION MEETING**

*(Abu Dhabi, UAE, 25 - 26 February 2015)*

**NOMINATION/REGISTRATION FORM**

**PLEASE COMPLETE THIS FORM CLEARLY WITH CAPITAL LETTERS**

**Name:** (As should appear in the official listing and name tag with family name first)

**Mr.** \_\_\_\_\_

**Ms.** \_\_\_\_\_

**Title or official position:** \_\_\_\_\_

**State/Organization represented:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**City:** \_\_\_\_\_ **Country:** \_\_\_\_\_

**Telephone number:** \_\_\_\_\_

**Fax number:** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

**Note:** Participants are expected to make their own hotel/visa arrangements

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**After completing, please send it by fax or e-mail to:**

ICAO Asia and Pacific Office, *P.O. Box 11, Samyaeak Ladprad, Bangkok 10901, Thailand*

**Fax: +66 (2) 537 8199**

**E-mail:** [APAC@icao.int](mailto:APAC@icao.int) **cc:** [pli@icao.int](mailto:pli@icao.int)