**ATTACHMENT B**

INTERNATIONAL CIVIL AVIATION ORGANIZATION

**CARSAMMA FOCAL POINTS MEETING**

Rio de Janeiro, Brazil, 11 to 13 August 2014

REGISTRATION FORM

|  |  |
| --- | --- |
| 1. *State:**Organization:* |  |
| 2. *Name:* |  |  |
|  |  |  |
| 3. P*osition*: |  |
|  |  |
| 4. *Participate as:* |
| *Member* | **□** | *Deputy* | **□** | *Delegate* | **□** | *Observer*  | **□** | *Lecturer* | **□** | *Instructor* | **□** | *Student* | **□** |
|  |  |
| 5. *Business address:* |  |
|  |  |
|  |  |  |  |  |  |
| 6. *Tel*.: |  |  | *E-mail*: |  |
| 7. *Hotel or local address:* |  |
| 8. *Flight information:* | *Arrival flight/ date/ hour:* |  |
| *Departure flight/ date/ hour:* |  |
|  |  |  |  |
| *Signature:* |  | *Date:* |  |