

**INTERNATIOINAL CIVIL AVIATION ORGANIZATION**

**EASTERN AND SOUTHERN AFRICAN OFFICE**

**TENTH MEETING OF THE AERODROMES OPERATIONAL PLANNING SUB-GROUP (AOP/SG/10) (NAIROBI, KENYA, 5-7 AUGUST 2013)**

**REGISTRATION FORM**

|  |  |
| --- | --- |
| **First Name (in full):**  **(Mr./Mrs./Ms./Dr./Eng./Pilot):** |  |
| **Surname (in full):** |  |
| **Designation:** |  |
| **Country:** |  |
| **Organization:** |  |
| **Address :** |  |
| **Telephone:** |  |
| **Fax:** |  |
| **Email :** |  |
| **Hotel Reservation:** |  |

*Please provide all the requested information and return by fax or email to:*

***Fax: +254 20 762 1092 or E-mail:*** [***icaoesaf@icao.int***](mailto:icaoesaf@icao.int)*Bottom of Form*