

ATTACHMENT C to State letter AS 8/1.7 – IND/11/11
AVIATION SECURITY REGIONAL CONFERENCE
CARACAS, VENEZUELA, 7 AND 8 FEBRUARY 2012

REGISTRATION FORM

PLEASE PRINT OR TYPE CLEARLY

1. Name in full:
Mr. / Mrs. / Ms. / Other

	First Name	Middle Name	Last Name
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2. Title/Position: _____

3. State/Organization/Company: _____

4. Mailing Address: _____

5. Telephone Number: _____

Fax Number: _____

E-mail: _____

Further information on the conference site, and other general information for delegates, can be found on the ICAO Website at www.icao.int under “Meetings and Events”, and www.lima.icao.int under “Meeting Programme 2012”.

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

Date: _____ Signature: _____

To register, please fax or e-mail this form by 31 December 2011 to:

International Civil Aviation Organization

South American Regional Office
E-mail: mail@lima.icao.int
Fax: + 511 6118689
and
North American, Central American and Caribbean Regional Office
E-mail: icaonacc@icao.int
Fax: +52-55-52032757

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