



NDB FIRST ANNUAL MEETING REGISTRATION FORM

First Name*: _____
Middle Name: _____
Last Name*: _____
Gender*: Male Female
Nationality*: _____
Date of Birth*: (Y) _____ - (M) _____ - (D) _____

Identity Document Type*: Passport ID Card Other
Passport / ID Number*: _____

E-mail*: _____
Telephone*: _____
Mobile: _____

Status (Head of Delegation / Member of Delegation / Guest): _____

Organization*: _____
Department, Division*: _____
Position*: _____

Please indicate if a visa invitation letter is required (Yes / No)*: _____

Arrival Date (MM-DD): (M) _____ - (D) _____
Arrival Flight Number and Time: (#) _____ (Time) _____
Departure Date (MM-DD): (M) _____ - (D) _____
Departure Flight Number and Time: (#) _____ (Time) _____
Hotel: _____
Dietary Restrictions: _____

Additional Information: _____

* - Obligatory fields

Please send a color ID photo (3x4 cm or 3.5x4.5 cm) together with this registration form.