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| The 27th Annual Meeting of  the Asia Pacific Parliamentary Forum (APPF)  **“Strengthening Parliamentary Partnership for**  **Peace, Security and Sustainable Development”**  January 14 – 17, 2019  Siem Reap, The Kingdom of Cambodia | C:\Users\Gateway\Desktop\APPF 2018 (Vimol)\Logo\Logo APPF 27th Final.jpg | **National Assembly of the Kingdom of Cambodia**  **APPF-27 Secretariat**    **Tele:** (+855-12) 761 666 or (+855-12) 924 384 **Fax :** (+855-23) 218 547 **Email:** thulheang@gmail.com  **Website:** [www.appf27.org.kh](http://www.appf27.org.kh)  **Online Register:** <http://www.appf27.org.kh/>appf27/FrontEnd/pages/register.aspx |

**Registration Form**

Please attached

Photo here

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| * Delegations are kindly requested to register online. Registration for all delegates must be completed and send to the Host Parliament no later than **30 November 2018**. * Please forward the completed form to the **Host Parliament** with the above contact:   ***Note:*** Delegate can register for him/herself and for other members of the Delegation (Each delegation will have to fill out one separate form). |

Please provide the following information as below:

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| **DELEGATION STATUS** |

Delegation : ⬜ APPF Member ⬜ Observers ⬜ Guest of Honor

Country : …………………………………………………………………………………………………………………………………………………………………………………..

Name of Parliament/Organization: …………………………………......................................................................................................................................................................................................................

Role with Your Delegation: ⬜ Head of Delegation ⬜ Delegate ⬜ Secretary/Assistant

⬜ Staff ⬜ Interpreter ⬜ Accompany Person

⬜ Other: ………………………..........................................................................................

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| **PERSONAL INFORMATION** |

First Name : …………………………………………………………………………………………………………………………………………………………………………………

Last Name : ………………………………………………………………………………………………………………………………………………………………………………….

Title : ⬜ Mr. ⬜ Mrs. ⬜ Ms. ⬜ Miss

Position : ……………………………………………………………………………................................................................................................................................................................................

*In Your Parliament/Organization*

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| **PASSPORT INFORMATION** |

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Passport Number: Expiry Date: …............................/…………….….….../…………………..…

Nationality : ………………………………………………..................................................................................................................................................................................................................................

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**Arrival & Departure Form**

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| **FLIGHT INFORMATION** | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Arrival** | Date: |  | Flight No: |  | | Time: |  | Airline: |  | | | |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Departure** | Date: |  | Flight No: |  | | Time: |  | Airline: |  | | |

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| **HOTEL INFORMATION** |

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| **Date:** | Check In: | Check Out: |
|  |  |
| **Name:** |  | |
| **Visa Number:** |  | |
| **Room Category:** | ⬜ Superior Room ⬜ Deluxe Room ⬜ Junior Suite Room ⬜ Royal Sokha Villa | |
| **Room Type:** |  | |

Dietary Requirements: ⬜ Vegetarian ⬜ Non Vegetarian

Other Requirements :