



SCUFN

IHO-IOC GEBCO Sub-Committee on Undersea Feature Names



REGISTRATION FORM

The 25th International Symposium of the SCUFN, Wellington, New Zealand, 2012

Please fill in the following form, save and send back completed via email to Kat Hammond:
k.hammond@gns.cri.nz by 31st August 2012.

COUNTRY AND ORGANISATION:

CONTACT DETAILS

Mr/Ms/Mrs/Dr/...

Family Name

Given or Personal Name

Position/Job Title/Role

Nationality

Telephone

Email

Accompanying person(s)

ATTENDANCE

I will be attending the Icebreaker	Mon 22 Oct 2012	Yes / No
I will be attending Day 1 of the Symposium	Tues 23 Oct 2012	Yes / No
I will be attending Day 2 of the Symposium	Wed 24 Oct 2012	Yes / No
I will be attending Day 3 of the Symposium	Thurs 25 Oct 2012	Yes / No
I will be attending Day 4 of the Symposium	Fri 26 Oct 2012	Yes / No
I will be attending Day 5 of the Symposium	Sat 27 Oct 2012	Yes / No
I will be attending the Formal Dinner	Date TBA	Yes / No
Do you have any special dietary requirements?		
_____ will be attending the partners programme	Dates/Locations TBA	Yes / No

TRAVEL DETAILS (for administrative purpose only; participants are expected to make their own travel arrangements)

Your Arrival at Wellington International Airport	Date
	Flight Number
Your Departure from Wellington International Airport	Date
	Flight Number

HOTEL INFORMATION

Selected Hotel Name

I REQUIRE A LETTER OF INVITATION FOR VISA/TRAVEL PURPOSES