

THE 12TH MACHC MEETING
St Kitts, 05 - 09 December 2011
DELEGATES REGISTRATION FORM

To be returned to <june.thompson@ukho.gov.uk >
 by 07 November 2011.

Member State: _____

HEAD or MEMBER			Head	Member	Member	Member
RANK or TITLE						
SURNAME (Family Name)						
FIRST NAME						
NAME (S) OF ACCOMPANYING PERSON (S) (if any)						
FLIGHT DETAILS	Arrival	date				
		time				
		Flt n°				
	Departure	date				
		time				
		Flt n°				
ACCOMODATION (Hotel Name)						
EMAIL						
TELEPHONE						

(1) Underline name generally used in case of doubles surnames as in Speaking-Spanish countries.

More information can be obtained from:
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