|  |
| --- |
| **REGISTRATION FORM** |
| Thank you for your participation in the 11th UNWTO Asia/Pacific Executive Training Program. Please fill out this Registration Form and **send it with a copy of your passport to the UNWTO Secretariat no later than** **20 February 2017** – **Registration by email** to aluquin@unwto-ap.org, cc:air@ustravel.kr, jlee@unwto.org, ingrid.kuman@papuanewguinea.travel |
| **PERSONAL INFORMATION** |
| **Country** |  | **Gender** | ⬜ Female ⬜ Male |
| **Title** | ⬜ Mr. ⬜ Ms. ⬜ Dr. ⬜ Others: \_\_\_\_\_\_\_\_ | **First Name on** **Passport** |  |
| **First Name** |  | **Last Name** |  |
| **Organization** |  | **Department** |  |
| **Position** |  | **E-mail** |  |
| **Phone** |  | **Mobile** |  |
| **Special Dietary** | ⬜ None ⬜ Vegetarian (vegetables only) ⬜ Vegetarian (with egg/fish/dairy products possible) ⬜ Halal ⬜ Kosher ⬜ Others\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **FLIGHT / ACCOMMODATION / TRANSPORTATION**  |
| • The UNWTO designated travel agency in Korea (US Travel,air@ustravel.kr) will contact you for making a flight reservation upon receiving your registration form. Please inform us of your preferred itinerary.• The Secretariat of the host (ingrid.kuman@papuanewguinea.travel) will arrange your accommodation and provide you with transportation between airport and hotel. |
| ***Arrival to PNG*** |
| **Departure** | Flight No. |  | Airport |  |
| Date |  | Time |  |
| **Connecting** | Flight No. |  | Airport |  |
| Date |  | Time |  |
| **Arrival** | Flight No. |  | Airport |  |
| Date |  | Time |  |
| ***Departure from PNG*** |
| **Departure** | Flight No. |  | Airport |  |
| Date |  | Time |  |
| **Connecting** | Flight No. |  | Airport |  |
| Date |  | Time |  |
| **Arrival** | Flight No. |  | Airport |  |
| Date |  | Time |  |
| **APPROVAL OF PARTICIPATION** |
| The applicant above should be endorsed by the **Director General or equivalent or higher-level officer** of the Ministry of Tourism or equivalent organization/department in order to attend this program. Please fill out the name of the endorser below.  |
| **Title** | ⬜ Mr. ⬜ Ms. ⬜ Dr. ⬜ Others: \_\_\_\_\_\_\_\_ |
| **First Name** |  | **Last Name** |  |
| **Organization** |  | **Department** |  | **Position** |  |
| **Signature** |  |
| **NOTE** |
| Please note that each participant takes full responsibility for checking whether a visa is required to enter the Papua New Guinea and for obtaining a visa if required. **Inquiries on VISA support** Ms. Ingrid Kuman /Policy Officer , PNG Tourism Promotion AuthorityE. Ingrid.kuman@papuanewguinea.travel T. +675 320 0211 F. +675 320 0223 |