4th ITU ASIA PACIFIC CENTRES OF EXCELLENCE STEERING COMMITTEE

MEETING 12 13 December 2017 Bangkok, Thailand

Annex 2

.

REGISTRATION FORM .
Please use CAPITAL letters
Given Name: Family Name:
Male: Female:
Title/Designation:
Name of Organization/Company:
Office Address:
Town: Country:
Telephone Number(s): Fax Number(s):
E mail:
Please fax/e mail this form duly completed by 30 November 2017 at the latest to the Pacific
'details 'MDES (Thailand):