

ESCAP/WMO TYPHOON COMMITTEE

11th Integrated Workshop

“Improving Typhoon impact-based forecasting and warning”

24-28 October 2016

Cebu, the Philippines

ATTENDANCE FORM

Important: The Attendance Form must submit to the **LOC Philippines** (E-mail: cynthia_celebre@yahoo.com/ejuanillo@yahoo.com/cj_zarate@yahoo.com OR fax: 6324342675) **with copy to TCS** (email: info@typhooncommittee.org OR fax: +853 8801 0530) on or before **31 August 2016**.

1. Dr./Mr./Mrs./Ms. _____
First Name Middle Name Last Name

2. **Present Official Position** _____

3. **Country** _____

4. **Agency/Organization** _____

5. **Mailing address:** _____

Fax Number: _____ Email _____
Tel. number : Office _____ Home/mobile _____

6. **Will Attend the 11th IWS as**

() REPRESENTATIVE () ADVISER
() ALTERNATE () OTHERS _____

7. In order to facilitate the application of Visa-on-Arrival or to issue the invitation letter for visa application purpose, please check the option below and provide the passport information as requested and return the Attendance Form to TCS, at your earliest convenience, but not later than 31 August 2016. The same information is required from the accompanying person, if any.

Full name as shown on Passport _____
Date of birth _____ Place of birth _____
Nationality _____ Gender _____
Passport number _____ Profession _____
Place of issue _____ Date of issue _____
Place to apply for visa _____ Expiry Date _____

8. **Accompanied by following members of family**

Name	Relationship	Age (if under 18)
_____	_____	_____
_____	_____	_____
_____	_____	_____

9. Flight Information

ARRIVAL

DEPARTURE

Place: _____

Date: _____

Flight No.: _____

Time: _____

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Flight details not yet available.

10. Details of nearby hotels are included in the Information Note for Participants. For our reference, please fill in your accommodation information.

I would like to reserve room at the Waterfront Cebu City Hotel and Casino or _____

Special Requirements or Requests: _____

CHECK-IN DATE _____

Time _____

CHECK-OUT DATE _____

Time _____

11. Please address this ATTENDANCE Form, preferably before 31 August 2016 to Local Organizing Committee of Philippines:

- | | | | |
|-------|-------------------------------|--------------|---------------------------|
| (i) | Dr. Cynthia P. Celebre | 632-434-2675 | cynthia_celebre@yahoo.com |
| (ii) | Ms. Edna L. Juanillo | 632-4349024 | ejuanillo@yahoo.com |
| (iii) | Ms. Marichu Charito J. Zarate | 632-434-2675 | cj_zarate@yahoo.com |

AND, with a copy to:

Ms. Denise Lau

Typhoon Committee Secretariat

Avenida de 5 de Outubro, Coloane

Macao, China;

Tel. No. (853) 88010531 Fax No. (853) 88010530

E-mail: info@typhooncommittee.org / denise@typhooncommittee.org

I, the undersigned, hereby accept the invitation of the **ESCAP/WMO Typhoon Committee to participate in the 11th Integrated Workshop on "Improving Typhoon impact-based forecasting and warning"**, Cebu, Philippines, from 24 to 27 October 2016, and agree to confirm that neither the ESCAP/WMO Typhoon Committee nor the host country will be responsible for:

- (1) Any costs incurred with respect to insurance, medical bills and hospitalization fees;
- (2) Compensation in the event of death, disability or illness; and
- (3) Loss or damage to personal property of the participant while attending the Meeting or during travel.

I also agree to refrain from engaging in political, commercial and/or any activities other than those governed by the program scheduled for the duration of the Workshop.

SIGNATURE _____

DATE _____