**Registration Form for The 5th APUCEN Summit 2024**

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| **Personal Information** |
| **Title** | □ Mr.□ Mrs.□ Miss. | **Last Name** |  | **First Name** |  |
| **Country** |  | **Passport No.** |  | **Email** |  |
| **Telephone** |  | **Institution / Organization** |  | **Position** |  |
| **Address** |  | **Post Code** |  |
|  |
| **Professional Information** |
| **Academic Qualifications** |  | **Area of Expertise** |  | **Purpose of Participation** | □ Speaker□ Panelist□ Attendee |
|  |
| **Accommodation Related** |
| **Food** | □ Moslem food□ Vegetarian□ Special Needs: □ No Preference | **Room** | □ Twin-bed Room□ Double Room |
| **Check-in Date** |  | **Check-out Date** |  |
|  |
| **Air Ticket Related** |
| **Airfare** | □ Covered by Perham□ Covered by yourself | **Arrival Date** |  | **Departure Date** |  |
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Note:

1. Please fill out this form in English.
2. No registration fee is required.
3. Perham will cover the round trip Economy air ticket for 2 keynote speakers.
4. Perham will cover the round trip Economy air ticket for 1 representative from each Council member.
5. Perham will provide accommodation up to 4 persons from each member institutions during the summit.