|  |  |  |
| --- | --- | --- |
| Description: LGO_0UIT | **Annex 3 / Приложение 3**  **РЕГИОНАЛЬНЫЙ** СЕМИНАР «СОВРЕМЕННЫЕ МЕТОДЫ УПРАВЛЕНИЯ ИСПОЛЬЗОВАНИЕМ РЧС»  **REGIONAL SEMINAR ON ADVANCED SPECTRUM MANAGEMENT**  (Алматы, Республика Казахстан, 12-16 сентября 2011)  **(**Almaty, Republic of Kazakhstan, 12 – 16 September 2011) | Description: LGO_0ITU |
| **Registration Form/Регистрационная форма** | | |

*(ЗАГЛАВНЫЕ БУКВЫ/CAPITAL LETTERS)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1.**Mr. Mrs. Miss  . | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  (family name)/(фамилия) | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (first name/ИМЯ) |
| **2.** Accompanied by (Family Member)  Сопровождающее лицо | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **3.** Country  Страна | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |

1. Representation/Представитель

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name of the Administration and/or Organization  Название Администрации или организации | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| **5.** Official address  Адрес | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| TEL/ТЛФ: | | | FAX/ФАКС: | E-MAIL: | |

**6.** HOTEL RESERVATION/РЕЗЕРВАЦИЯ ГОСТИНИЦЫ

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Single room |  | Double room |  | Lux one room |  | Lux two rooms |  |
| Одноместный номер | Двухместный номер | Однокомнатный люкс | Двухкомнатный люкс |

|  |  |
| --- | --- |
| Aeroport transfer required | YES/NO  ДА/НЕТ |
| Требуется доставка из аэропорта |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **7.** Date of Arrival |  | FLIGHT NO. |  | TIME OF ARRIVAL |  | FLIGHT NO. |  |
| Время прилета | № рейса | Время вылета | № рейса |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date/Дата: | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Signature/Подпись: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | | | | |

To be returned duly completed to (one form per participant) before 26 August 2011 to:/

Форма должна быть заполнена полностью(одна форма на каждого участника) и отправлена до 26 августа 2011:

|  |  |
| --- | --- |
| Цыбина Александра Букеева Гульнара Сембековна | Alexandra Tsybina  Gulnara Bukeeva |
| Факс/Fax + 7 717 2 74 10 58,  Тлф/Tel. + 7 717 2 03 55,  7 171 2 74 01 43  [tsybina@mci.gov.kz](mailto:tsybina@mci.gov.kz)  [bukeeva@mci.gov.kz](mailto:bukeeva@mci.gov.kz) | |