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**Registration Form**

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| --- | --- |
| Personal Information | |
| Title | Mr.  Ms.  Mrs.  Dr.  Prof.  Other: |
| First Name |  |
| Family Name |  |
| Organization |  |
| Position (Job Title) |  |
|  |  |
| Contact Information | |
| Address |  |
| City/Town |  |
| Postcode |  |
| Country |  |
| Phone No. |  |
| Mobile No. |  |
| Email |  |

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| I will attend | Pre-symposium Workshop on the efficient use of the orbit/spectrum  30 August 2017  International Satellite Symposium 2017  31 August – 1 September 2017 |

Please return the completed registration form to:

Mr Wisit Atipayakoon, Email: [wisit.atipayakoon@itu.int](mailto:wisit.atipayakoon@itu.int)  
Or fax to, +66 2575 3507