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| Certificados **CTO_logo** | | | |
| **The First Pacific Islands Capacity Building Workshop on Child Online Protection and Commonwealth National Cybersecurity Framework Regional Workshop**  22-24 September 2014  Port Vila, Vanuatu  Supported by  DOC_Australia **impact_logo** | | | |
| **REGISTRATION FORM** |
| To be returned to Mr. Wisit Atipayakoon at[wisit.atipayakoon@itu.int](mailto:wisit.atipayakoon@itu.int)  **before 25 August 2014**   |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Name : | | | | | | | | | | MR./MRS./MS./DR./PROF. FIRSTNAME MIDDLE NAME LASTNAME  Administration/Organisation: | | | | | | | | | | Present Post (Job Title) : | | | | | | | | | | Division/Department : | | | | | | | | | | Contact Address : | | | | | | | | | | City / State : | | | Zip Code : | | | | | Country : | | Phone No : | | | | Fax No : | | | | | | Email address : | | | | | | | | | | **Arrival / Departure Information** | | | | | | | | | | Arrival Date: | Arrival Time: | | | | | Arrival Flight: | | | | Departure Date: | Departure Time: | | | | | Departure Flight: | | | | **Hotel Reservation** | | | | | | | | | | [please indicate a hotel below] | | **Check-in Date:** | | | | | **Check-out Date:** | | |  | | | | |  | | | Date : | | | | | Signature : | | | | | | | |