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| ITU logo-07 | ***Conformity and Interoperability Training for Africa Region*** ***Tunis-Tunisia, 30 May – 3 June 2016*** |  |

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| **HOTEL RESERVATION FORM*****(to be submitted before 30 April 2016)*** |

**(USE *CAPITAL LETTERS*)**

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| **1.**  **Mr. / Mrs.**  **(Family name) (First name)****2. Country :** **3.Address :** **4. Tel.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail :**  |

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| **5. Specify name of hotel \_\_\_\_\_\_**  **Hotel Fax No. *\_\_\_\_\_\_***  **Booking of a single room** **Booking of a double room** **from to**  ***for*  *nights*** |
| **6. Arrival Date :** ***Day:* \_\_\_\_\_\_\_\_\_\_\_\_\_ *Time : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* *Flight No.* : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **7.Departure date :** ***Day :* \_\_\_\_\_\_\_\_\_\_\_\_ *Time : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* *Flight No.* : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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|  Date : Signature :  |

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| ***To be returned before 30 April 2016, to:*** **cc:**  |  the hotel choosen**Mrs. Wala TURKI LATROUS**CERT - TunisiaTel  : +216 70 835 000Fax  : +216 70 835 835E-mail: [wala.latrous@cert.mincom.tn](file://HVCAI1/shared_area/Work/RegionalEvents.Workshops.Seminars.Meetings/2015/C%26I-2015/wala.latrous%40cert.mincom.tn)  |