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**APRECON**

**Asia Pacific Regional Conference & Other Relevant Meetings**

**Fukuoka, Japan**

9-12 October 2016

**QUALITY PUBLIC SERVICES KEEP THE COMMUNITY SAFE**

**PARTICIPATION FORM No. 3**

**(General Participants Only)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| PERSONAL INFORMATION | | | | | |
| Family Name : | |  | | | |
| First Name : | |  | | | |
| Gender :  *(Please click the box to select)* | | |  |  |  |  | | --- | --- | --- | --- | | ☐ | Female | ☐ | Male | | | | |
| Union : | |  | | | |
| Position: | |  | | | |
| Country : | |  | | | |
| Address : | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Tel. No: Fax. No:  Email:  Mobile No: | | | |
| Passport Details[[1]](#footnote-1) | Passport Holder’s Name | | | | Last Name (or Family Name):  First Name (or Given Name): |
| Nationality | | | | : |
| Passport Issuing Country | | | | : |
| Date of Birth | | | | : |
| Passport Number | | | | : |
| Date of Issue | | | | : |
| Place of Issue | | | | : |
| Expiry Date | | | | : |
| STATUS *(Please click the box to select)* | | | | | |
| Head of delegation ☐ Yes ☐ No  *(Only ONE head of delegation per affiliates union)*  ☐ DELEGATE ☐ UNION VISITOR  ☐ OBSERVER ☐ GUEST invited by PSI  ☐ STAFF ☐ INTERPRETER    ☐ FAMILY member (*Accompanying an affiliate*) | | | | | |
| MEETINGS TO ATTEND *(Please click the box to select)* | | | | | |
| ☐ Youth Forum, 9 Oct 2016 (<35 years)  ☐ AP WOC Meeting, 9 Oct 2016  ☐ APREC Meeting, 10 Oct 2016 *(only members)* | | | ☐ Pre-APRECON (Local Government & Utilities Network Meeting, 10 Oct 2016  ☐ Pre-APRECON (Health Network Meeting), 10 Oct 2016  ☐ APRECON, Day One, 11 Oct 2016  ☐ APRECON, Day Two, 12 Oct 2016 | | |
| Dietary Preferences if any | | | | | |
| |  |  |  |  | | --- | --- | --- | --- | | ☐ | Vegetarian | ☐ | Non-Vegetarian | | | | | | |
| INTERPRETATION  I require interpretation in the following language to be able to participate in the meeting  *(Please click the box to select)* | | | | | |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | ☐ | English | ☐ | Japanese | ☐ | Other language (will be arranged if there is a need and a large delegation ) | | | | | | |
| *Please note that when interpretation has been arranged especially for you, if you cancel your participation in the meeting after the contract is signed by the interpreter, your union will have to pay the interpreter's bill.* | | | | | |
| HOTEL RESERVATION | | | | | |
| The hotel information will be sent at a later date. | | | | | |
| TRAVEL | | | | | |
| Participants are requested to make their own booking and to inform PSI about their flight details, as follows:  *(Please note that PSI can make a hotel reservation only when the participants has provided the travel itinerary in advance)* | | | | | |
| ARRIVAL | | | | **DEPARTURE** | |
| Flight No:  Date of Arrival:  Time:  Arriving in Fukuoka via\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Airport | | | | Departure Date:  Time:  Flight No: | |
| INSURANCE | | | | | |
| We would advise you to get appropriate personal travel insurance. PSI does not cover any insurance costs for participants | | | | | |
| PAYMENT OF PSI AFFILIATION FEES | | | | | |
| Please note: only unions that are up to date with payment of PSI affiliation fees can submit this request form. | | | | | |
| To be sent before 1 June 2016 to  PSI Asia-Pacific Regional Office  Contact persons: Ms. Lakshmi Vaidhiyanathan  c.c. to Ms. Indah Budiarti  Address: Address: PSI Regional Office for Asia & Pacific,  c/o Amalgamated Union of Public Employees  Wisma AUPE, 295 Upper Paya Lebar Road, Singapore 534929  Tel: +65.62. 823219; Fax: +65 62 804919  Email: [Lakshmi.Vaidhiyanathan@world-psi.org](mailto:Lakshmi.Vaidhiyanathan@world-psi.org)  Cc to: [indah.budiarti@world-psi.org](mailto:indah.budiarti@world-psi.org)  All forms must also be sent to (as copy):  *PSI East Asia Sub Regional Office*  Contact person: Mr. Hiroo Aoba at: [Hiroo.aoba@world-psi.org](mailto:Hiroo.aoba@world-psi.org)  *PSI Oceania Sub Regional Office*  Contact person: Mr. Michael Whaites at: [michael.whaites@world-psi.org](mailto:michael.whaites@world-psi.org)  *PSI South Asia Sub regional Office*  Contact person: Mr. Raman Kannan at: [kannan.raman@world-psi.org](mailto:kannan.raman@world-psi.org)  *PSI Southeast Asia Sub regional office*  Contact person: Mr. Ian Mariano at: [ian.mariano@world-psi.org](mailto:ian.mariano@world-psi.org)  *PSI Secretariat (Asia Pacific Liaison)*  Contact person: Ms. Nobuko Mitsui  Address: 45 avenue Voltaire, BP 9, 01211 Ferney-Voltaire Cedex, France  Tel: +33 4 5040 1149  Fax: +33 4 5040 5094  Email: [Nobuko.Mitsui@world-psi.org](mailto:Nobuko.Mitsui@world-psi.org) | | | | | |

1. **PLEASE SEND US A COPY OF YOUR PASSPORT** [↑](#footnote-ref-1)