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| **A**sian **P**arliamentary **A**ssembly | | |
|  | **Standing Committee on**  **Budget & Planning**  **Doha, Qatar**  **4-7 November 2024** |  |
| **Registration Form** | | |

**Delegation of**:

*Name of Parliament*

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|  | Date | Airline & Flight number | Time | Explanation |
| Arrival |  |  |  |  |
| Departure |  |  |  |  |

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| **No.** | **Delegation Information** | **Photo** |
| 1 | First Name: Last Name:  Passport No:  Passport issue date: Passport expiry date:  Date of birth (d/m/y): Place of birth (City, Country):  □Head of delegation  Phone: Email: |  |
| 2 | First Name: Last Name:  Passport No:  Passport issue date: Passport expiry date:  Date of birth (d/m/y): Place of birth (City, Country):  □Member of delegation  Phone: Email: |  |
| 3 | First Name: Last Name:  Passport No:  Passport issue date: Passport expiry date:  Date of birth (d/m/y): Place of birth (City, Country):  □Member of delegation  Phone: Email: |  |
| 4 | **Point of contact:**  First Name: Last Name:  Passport No:  Passport issue date: Passport expiry date:  Date of birth (d/m/y): Place of birth (City, Country):  □Staff  Phone: Email: |  |

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| Host Secretariat: | CC to APA Secretariat: |
| Email: bpdoha@shura.gov.qa  Tel:  Mob : | Email: secretariat@asianparliament.org  Fax: (+98-21) 33517408  Phone: (+98-21) 33517406-7 |