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| **A**sian **P**arliamentary **A**ssembly | | | |
|  | **Standing Committee on Political Affairs**  **Executive Council Meeting**  **The 13th Plenary Session**  **Antalya, Türkiye**  **8-10 January 2023** |  |
| **Registration Form** | | | |

The deadline for submission of registration form is **30 December 2022**.



**Delegation of**: ………………………………

*Name of Parliament*

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

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| **No.** | **Delegation Information** | **Photo** |
| 1 | First Name: Ms. / Mr. …………………………….. Last Name: ………………….……………  Passport No: ……………………………….  Passport issue date: ………………………. Passport expiry date:……………....……………  Date of birth (d/m/y):…………………..…... Place of birth (City, Country):………………..….  Position: ……………………………. □Head of delegation □Member of delegation  Phone: ………………………………………. Email: …………………………..……………… |  |
| 2 | First Name: Ms. / Mr. …………………………….. Last Name: ………………….……………  Passport No: ……………………………….  Passport issue date: ………………………. Passport expiry date:……………....……………  Date of birth (d/m/y):…………………..…... Place of birth (City, Country):………………..….  Position: ……………………………. □Head of delegation □Member of delegation  Phone: ………………………………………. Email: …………………………..……………… |  |
| 3 | First Name: Ms. / Mr. …………………………….. Last Name: ………………….……………  Passport No: ……………………………….  Passport issue date: ………………………. Passport expiry date:……………....……………  Date of birth (d/m/y):…………………..…... Place of birth (City, Country):………………..….  Position: ……………………………. □Head of delegation □Member of delegation  Phone: ………………………………………. Email: …………………………..……………… |  |
| 4 | First Name: Ms. / Mr. …………………………….. Last Name: ………………….……………  Passport No: ……………………………….  Passport issue date: ………………………. Passport expiry date:……………....……………  Date of birth (d/m/y):…………………..…... Place of birth (City, Country):………………..….  Position: ……………………………. □Head of delegation □Member of delegation  Phone: ………………………………………. Email: …………………………..……………… |  |
| 5 | First Name: Ms. / Mr. …………………………….. Last Name: ………………….……………  Passport No: ……………………………….  Passport issue date: ………………………. Passport expiry date:……………....……………  Date of birth (d/m/y):…………………..…... Place of birth (City, Country):………………..….  Position: ……………………………. □Head of delegation □Member of delegation  Phone: ………………………………………. Email: …………………………..……………… |  |

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| Host Secretariat: | CC to APA Secretariat: |
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