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| **REGISTRATION FORM** |
| Thank you for your participation in the 15th UNWTO Asia/Pacific Executive Training Programme. Please fill out this Registration Form and send it with **a copy of a physical participant’s passport** to the **UNWTO Secretariat no later than 8th September 2021** – **Registration by email** to nkim@unwto.org, cc: yli@unwto.org |
| **REPRESENTATIVE INFORMATION** |
| **Country** |  | **Gender** | ⬜ Female ⬜ Male |
| **Title** | ⬜ Mr. ⬜ Ms. ⬜ Dr. ⬜ Others: \_\_\_\_\_\_\_\_ | **First Name on** **Passport** |  |
| **First Name** |  | **Last Name** |  |
| **Organization** |  | **Department** |  |
| **Position** |  | **E-mail** |  |
| **Mobile** |  | **Participation** | ⬜ Physical Participation ⬜ Virtual Participation |
| **Country Presentation** | Please choose one of **Session 1-3 Topics** for your country presentation.⬜ Session 1 **Destination Management and Operations for increased Domestic Tourism**⬜ Session 2 **Engaging the Private Sector to Foster Domestic Tourism**⬜ Session 3 **Innovation and the Future of Domestic Tourism: Building Opportunity for Growth and Development**  |
| **Special Dietary**  | ⬜ None ⬜ Vegetarian (vegetables only) ⬜ Vegetarian (with egg/fish/dairy products possible) ⬜ Halal ⬜ Kosher ⬜ Others\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **FLIGHT / ACCOMMODATION / TRANSPORTATION**  |
| • We will contact you to make a flight reservation upon receiving your registration form. **Please inform us of your preferred itinerary.**• The Secretariat of the host – the Maldivian government - will arrange your accommodation and provide you with transportation between airport and hotel. |
| ***Arrival to Male, the Maldives (in case of physical participation)*** |
| **Departure** | Flight No. |  | Airport |  |
| Date |  | Time |  |
| **Connecting** | Flight No. |  | Airport |  |
| Date |  | Time |  |
| **Arrival** | Flight No. |  | Airport |  |
| Date |  | Time |  |
| ***Departure from Male, the Maldives (in case of physical participation)*** |
| **Departure** | Flight No. |  | Airport |  |
| Date |  | Time |  |
| **Connecting** | Flight No. |  | Airport |  |
| Date |  | Time |  |
| **Arrival** | Flight No. |  | Airport |  |
| Date |  | Time |  |
| **NOTE 1** |
| Please note that each participant takes full responsibility for checking whether a visa is required to enter Maldives and for obtaining a visa if required. **For Inquiries on VISA support:** **Ms. Mariyam Lubna**, Assistant International Relations Officer, International Relations Department **Mariyam.lubna@tourism.gov.mv** |

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| **NOTE 2** |
| Please note that each Member State will also be allowed to enroll one additional official from their administration as **a virtual observer**. Please fill out the officer’s information below. After your registration, we will share the zoom link for the event in due course. |
| **Country** |  | **Title** | ⬜ Mr. ⬜ Ms. ⬜ Dr. ⬜ Others: \_\_\_\_\_\_\_\_ |
| **First Name** |  | **Last Name** |  |
| **Organization** |  | **Department** |  |
| **Position** |  | **E-mail** |  |
| **APPROVAL OF PARTICIPATION** |
| The applicant above should be endorsed by the **Director-General or equivalent or higher-level officer** of the Ministry of Tourism or equivalent organization/department to attend this event. Please fill out the endorser’s information below. |
| **Title** | ⬜ Mr. ⬜ Ms. ⬜ Dr. ⬜ Others: \_\_\_\_\_\_\_\_ | **Organization** |  |
| **First Name** |  | **Last Name** |  |
| **Department** |  | **Position** |  |
| **Signature** |  |