## **EVALUATION CONCLAVE 2017**

6 – 9 June, 2017 Thimpu, Bhutan

## REGISTRATION FORM – CITIZENS OF BHUTAN

112415111111111111111111111111111111111				
Please tick (√) the boxes □				
Prefix: (tick √)		Prof. Dr. Mr.	M	S
Name ( <u>underline</u> family name):				
Mailing Address: No/Street:				
		City::		Zip Code:
Telephone				
E-mail	Personal			
	Official			
Designation				
Institutional Affiliation and address				
Event Participation (tick V one or more)		Pre-conclave workshop		
		Conclave		
Total Amount to be paid		BTN		
Registration fee will be paid by:				

The completed form should be submitted by email or in paper form to:

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