

The Sixth Global Inter-religious Conference on Article 9

June 13th – 15th, 2018

Hiroshima, Japan

REGISTRATION FORM

Passport Details

Family Name:		Given Name:	
Date of Birth:		Place of Birth:	
Nationality:			
Passport Number:		Date of Issue:	
Place of Issue:		Date of Expiry:	
Title:	<input type="checkbox"/> Rev. <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Miss <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Other_____		

Church/Religious Group/Organization:

Personal data:

Address			
E-mail address:		Telephone number:	
Dietary and health considerations, if any:			
Contact person in case of emergency (name, relationship, phone, email):			
Name as you would like it written on name-tag:			

Participation of Exposure:

Exposure on June 12th (Hiroshima Peace Memorial Park): Yes or No

Travel Details:

Date of Arrival:		Date of Departure:	
Airport of Arrival:		Airport of Departure:	
Airline and Flight No:		Airline and Flight No:	
Time of Arrival:		Time of Departure:	

Please return this registration form **by April 30, 2018** preferably by email, to:

article9@ncc-j.org