Appendix A

***REGISTRATION FORM for Participants***

**Naval Academy**

Flensburg-Germany

*9*th *September – 19*th *September 2024*

|  |  |  |  |
| --- | --- | --- | --- |
| First Name: | **[…]** | Last Name: | **[…]** |
| Title / Function: | […] | Ms/Mrs/Mr: | **[…]** |
| Country: | **[…]** | Email: | **[…]** |
| Organisation: | […] |
| Food  | Vegetarian Pork Beef No special requirements |
| **Additional information for Point of contact** |
| Office phone: | + […] | Office Fax: | + […] |
| Email: | […] |  |  |
|  |
| **TRAVEL DETAILS**Please tick the appropriate box: | By plane [ ]  | By bus [ ]  | By car [ ]  |
|  |  |  |  |
| **ARRIVAL details** |
| Arrival date: | **[…]** | Arrival time: | **[…]** | From: (city) | […] |
| To Airport: | […] | Flight number: | […] |
| Railway station: | […] | Terminal: | […] |
| **DEPARTURE details** |
| Departure date: | **[…]** | Departure time: | **[…]** | Destination: | […] |
| From Airport: | […] | Flight number: | […] |
| Railway station: | […] | Terminal: | […] |
|  |
| **Dietary and/or special requirements, extra-nights… (please complete if needed):** […] |

Please return the completed form by 17th June 2024 to:

**MSMTRIONAUT@bundeswehr.org, +49 461 3135 5090**

**Please appoint POC, in case of need for future correspondence.**

German naval academy MürwiK

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