ID

CAPACITY BUILDING SUB-COMMITTEE

PROCEDURE 8

Part 2

**FLIGHT INFORMATION**



|  |
| --- |
|  **(to be sent to mfa@iho.int, copy to adcc@iho.int)** |
|  **(To be completed by the Project Leader only if the air tickets will be organized by the IHB)** |
| Project number: | 0 |
| Project name: | 0 |

**Airport of destination:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **First Name** | **Family name** | **Departure date** | **Airport of departure** | **Return date** | **Nationality** | **Observations** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |   |
|  |  |  |  |  |  |   |
|  |  |  |  |  |  |   |
|  |  |  |  |  |  |   |
|  |  |  |  |  |  |   |
|  |  |  |  |  |  |   |
|  |  |  |  |  |  |   |
|  |  |  |  |  |  |   |

Note: the name shall be the same as in the passport