**The 14th Conference of the Southern Africa and Islands Hydrographic Commission (SAIHC)  
Saint-Gilles les bains, la Réunion, France - 6th to 8th September 2017**

REGISTRATION FORM

*[Please send this form completed via e-mail to:*

Ms. Patricia Morgand ([dg-sec@shom.fr](mailto:dg-sec@shom.fr)) and for info to Ms Ruth Farre ([hydrosan@iafrica.com](mailto:hydrosan@iafrica.com))

|  |  |
| --- | --- |
| **Member State / Organization** |  |

1. Your Details:

|  |  |
| --- | --- |
| Family Name\* |  |
| Given or Personal Name |  |
| Email address |  |
| Accompanying person(s) (if any) |  |

1. Travel Details: (for administrative purpose)

|  |  |  |
| --- | --- | --- |
| Your Arrival | Date |  |
| Flight Number |  |
| Arrival Time |  |

|  |  |  |
| --- | --- | --- |
| Your Departure | Date |  |
| Flight Number |  |
| Departure Time |  |

1. Accommodation Information

*Participants are expected to arrange their own accommodation.*

|  |  |
| --- | --- |
| Hotel *Relais de l’héritage* (Yes or No) |  |
|  |  |
| Other (Name of the hotel) |  |

1. Social Events

|  |  |
| --- | --- |
| 5 September – Ice Breaker (Yes or No) |  |
|  |  |
| 7 September – Conference Dinner (Yes or No) |  |

|  |  |
| --- | --- |
| Comments |  |
| Date |  |