REGISTRATION FORM SAWMM2014 (Wellington, New Zealand)

**June 14th-15th, 2014**

**Rydges Wellington Hotel**

**75 Featherston St, Pipitea, Wellington 6011, New Zealand**

Please complete this registration form, one copy for each delegate attending. Once completed please return it to the Secretariat at info@seoulaccord.org or fax to +886-2-2367-9452 no later than May 30th, 2014**.**

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| **Personal Information** |
| **Title** | □Prof. □Dr. □Mr. □Ms. |
| **First Name** |  | **Family Name** |  |
| **Position** |  |
| **Institution** |  |
| **Membership Status** | □Signatory □Non-Signatory |
| **Address** |  |
| **City** |  | **Postal Code** |  |
| **Country** |  | **Email** |  |
| **Phone** |  | **Fax** |  |
| **Dietary Preference** |  □ Vegetarian □ Other (please indicate): |

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| Flight Details |
| **Arrival** | **Date** |  | **Time** |  |
| **Airline** |  | **Flight No.** |  |
| **Departure** | **Date** |  | **Time** |  |
| **Airline** |  | **Flight No.** |  |
| **Additional Information** | (names of accompanying person, if any) |

*(This is optional. But if you have the flight details, please provide them here.)*

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| **Reception/Dinner/Lunch**Please indicate your choices among options below |
|  | **June 13th (Fri.)Reception** | **June 14th (Sat.)** | **June 15th (Sun.)Lunch** |
| **Lunch** | **Dinner** |
| **Attending** | □ | □ | □ | □ |
| **Not Attending** | □ | □ | □ | □ |
| **Accompanying Person** | □ | □ | □ | □ |

*(Locations and schedule details to be announced )*

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| **Hotel Information** |
| For lodging reservation please contact Rydges Hotel at reservations\_wellington@rydges.com or call +64-4-498-3765 directly if needed. The special event rates at Rydges are:Superior King/Twin Rooms – * Room only: $189.00incl GST per room, per night
* Bed and Breakfast: $209.00incl GST per room, per night
* Bed and Breakfast rate for 2 adults: $229.00incl GST per room, per night

Be sure to quote **Block Code: H-IEE0614** to access the special rate. |