



# Registration Form

..... International Capstone Course (ICC) Rome, Italy  
(..... January - ..... March – 20..)



All participants to the .... ICC shall register using this form, to be submitted by **November 2<sup>nd</sup>** via e-mail to ICC Section [iasd.icc@casd.difesa.it](mailto:iasd.icc@casd.difesa.it))

<b>Attendee Information</b>	Salutation / Rank	*	Please select from drop down list
	Family Name	*	
	Given Name	*	
	Organization	*	
	Nationality	*	Country of Citizenship (other )

<b>Passport</b>	Passport number	*	
	Date of issue	*	
	Date of expiry		

<b>Contact Information</b>	Address	*	
	City	*	
	Province/State (as required)		
	Nation	*	Country of Residence (other )
	Zip Code/Postal code	*	
	Business Telephone Number	*	--
	Cell Phone	*	--
	Business Fax		--
	Email address	*	

<b>Flight Schedule</b> **	Date of arrival at FCO Airport	*	--
	Time of arrival (24 hours format)	*	-- :--
	Airline	*	
	Flight Number	*	(via )
	Date of departure from FCO Airport	*	--
	Time of departure (24 hours format)	*	-- :--
	Airline	*	
	Flight Number	*	(via )
	Transportation from the airport to the hotel	*	NEEDED <input type="checkbox"/> NOT NEEDED <input type="checkbox"/>

<b>I have read the Joining Instructions</b>	*	CONFIRM <input type="checkbox"/>
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\* **Mandatory fields.**

\*\* **Please Note:** All participants are expected to attend the closing ceremony, i.e. departures should be scheduled after the event.