



MID-YEAR EXECUTIVE COMMITTEE MEETING

**CPA SABAH BRANCH
27th APRIL – 3rd MAY 2015**

**ACCEPTANCE OF INVITATION, CONTACT DETAILS AND
ACCOMODATION REQUIREMENT FORM**

IMPORTANT: to be completed and returned by 16th January 2015 to:

Mrs Musonda Sandy
Assistant Director, Conference and Events
CPA Headquarters Secretariat
Suite 700, Westminster House
7 Millbank, London SW1P 3JA
United Kingdom

Tel: (+44 (0) 20) 7799 1460
Fax: (+44 (0) 20) 7222 6073
Email: musonda.sandy@cpahq.org

Note: In the Absence of Mrs. Sandy:

Ms Wezi Nyirenda
Conference Assistant
CPA Headquarters Secretariat

Email: wezi@cpahq.org and
mid-yearexco2015@cpahq.org

1. ACCEPTANCE (see (2) overleaf)

I will be attending the Commonwealth Parliamentary Association Mid-Year Executive Committee Meeting to be held in Kota Kinabalu, Sabah, Malaysia from 27th April to 3rd May 2015 : **(Yes / No)**

2. PERSONAL DETAILS

Full Name (Including title) :

.....
.....

Branch and Region:

.....

Your Contact Details:

Address:

.....

.....

Fax :

Telephone:

Email:

3. **NAME BADGE**

Please indicate here **exactly** how you wish your name to be printed on your name badge.

.....

4. **SPOUSE/PARTNER**

I will be accompanying by my spouse/partner: **(Yes / No)**

If yes, please give name of spouse/partner (as to appear on name badge).

Full Name (including title):

.....

5. **ACCOMODATION IN KOTA KINABALU, SABAH, MALAYSIA**

Date from which required
(if other than 27th April 2015)

Date until which required
(if other than 3rd May 2015)

Hotel Room

Would like –

a) A smoking or non smoking hotel room

b) A room with a double bed or twin beds.....

6. **SPECIAL DIET**

If you or your spouse / partner have any special dietary requirements please indicate:

Member

Spouse /

Partner

7. **SUBSTITUTE ATTENDEE**

If not attending, will another person attend in your place?: **(Yes / No)**

If yes, please give details:

Full Name (including title):

.....
.....

Branch and Region:

.....

Address:

.....

Fax :

Telephone:

Email:

8. **ACCOMPANYING OFFICIAL**

I will be accompanying by an official **(Yes / No)**

If yes, please give details:

Full Name (including title):

.....
.....

Branch and Region:

.....

Address:

.....

.....

Fax :

Telephone:

Email:

NOTE: The CPA Headquarters Secretariat will not meet any costs of travel, accommodation or meals for accompanying officials. (Please see Information Circular for further details).