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| EMVLHMA-KYPRIAKHS-DHMOKRATIAS-600x600 | **REPUBLIC OF CYPRUS****MINISTRY OF DEFENSE****NATIONAL GUARD GENERAL STAFF****OPERATIONS DIRECTORATE**  |  |

**CIMIC EXERCISE «ARGONAUT 2019»**

**REGISTRATION FORM**

**Participant Contact Information:**

|  |  |
| --- | --- |
| Country |  |
| Rank/title |  |
| Name |  |
| Public authority / organization |  |
| Work address |  |
| E-mail address |  |
| Cell phone number |  |
| Office phone number |  |
| Passport (country of origin / number) |  |
| Accommodation (hotel) |  |
| Food allergies (or vegetarian) |  |

**Travel information**

|  |  |  |  |
| --- | --- | --- | --- |
| Arrival Day | Time | Airport of arrival  | Flight n° |
|  |  |  |  |
| Departure Day | Time | Airport of departure  | Flight n° |
|  |  |  |  |

**Any additional information**

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| --- |
|  |

**Please send by e-mail the submission form for each participant as soon is prosiple (ASAP) and not later than 10 May 2019 to** **depix\_ops@army.gov.cy**

**or Fax to +35722417323**