



REGISTRATION FORM

1st SAANSO WOOD BADGE REUNION, MAAFUSHI, MALDIVES

(Please complete and submit this form by 31st January 2019)

Please type or use BLOCK letters and tick (v) in boxes where necessary

1. PERSONAL DETAILS

Mr/Mrs/Miss _____

Full Name

Preferred Name

Address _____

Zip / Pin Code _____ Country _____

Nationality _____ Religion _____ Passport No. _____

T. shirt size – M/L/XL/XXL _____

Email _____ *Contact Number* _____

Emergency Contact Name _____ Telephone _____

2. SPECIAL DIET and Physical Restrictions

Medical dietary or religious reasons. Please state details.

(i.e. no meat, no fish, no egg, no sugar etc) _____

Medical Requirements or Physical Restrictions



3. Accommodation (all rooms are twin rooms with 2 separate beds)

I wish to share with Mr/Mrs/Miss _____

Full Name _____ (**)

I wish to have a **room to myself** _____ tick (v) here

(**) if sharing a room there must be a registration form for each person

Additional Nights –

I would like to book additional nights for the following dates :

TRAVEL DETAILS (Arrival/Departure at Velana International Airport)

Prefer to receive ticket copy/itinerary

Arrival details: Date _____ Time _____ Flight No. _____

Departure details: Date _____ Time _____ Flight No. _____

DATE : _____

SIGNATURE _____