



**REGISTRATION FORM FOR PARTICIPANTS**

**3<sup>rd</sup> BALKAN COUNTRIES POLICE TRAINING CONFERENCE (BALPEK )**

**Prishtina, Kosovo, September 23<sup>rd</sup> –24<sup>th</sup>, 2013**

First Name:		Last Name:	
Title / Position:		Ms/Mrs/Mr:	
Country:		Postcode:	
Name of Institution			
Full Address:			
Office Phone:		Office Fax:	
Mobile Phone:		Email:	
Please indicate the following how they should appear in print eg. Name tag. Program			
Credentials			

**ARRIVAL DETAILS (FROM DESTINATION COUNTRY TO PRISTINA)**

**Means of transport:**

Arrival Date:		Arrival Time:		From: (City)	
To Airport:				Flight number:	

**ARRIVAL DETAILS (FROM PRISTINA TO DESTINATION COUNTRY)**

**Means of transport:**

Departure Date:		Departure Time:		Destination:	
To Airport:				Flight number:	

**OTHER DETAILS**

Dietary and/or special requirements (please complete if needed): /

Please return this registration form via e-mail not later than 10<sup>th</sup> of September, 2013 to Kosovo Academy for Public Safety (KAPS)

Phone: + 381 28 570 008, ext. 199

E-mail to: [info.aksp@rks-gov.net](mailto:info.aksp@rks-gov.net); [skender.agaj@rks-gov.net](mailto:skender.agaj@rks-gov.net);