

**2006 OSCE-Thailand Conference  
Field Trip to Ayutthaya  
27 April 2006**

**A P P L I C A T I O N   F O R M**

<i>Ms.</i> <input type="checkbox"/> <i>Mr.</i> <input type="checkbox"/> <i>Family Name:</i>	<i>First Name:</i>

<i>Title and Position:</i>

<i>State/Delegation/International Organization</i>

<i>Street or Mail address:</i>	<i>City Code:</i>	<i>City:</i>	<i>Country:</i>

<i>Tel. No. with all prefixes:</i>	<i>Fax No. with all prefixes:</i>

<i>Mobile No. with all prefixes:</i>	<i>E-mail address:</i>
	@

Please indicate, if applicable, information on your physical condition, dietary restriction or medication

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

Please submit the completed form to the attention of:

**Ms. Chitrachawee Pakdi-arsa**  
Third Secretary  
Division 1, Department of European Affairs  
Ministry of Foreign Affairs of Thailand

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