 

**UBC SAFE CITIES COMMISSION**

**THE 1-ST MEETING**

**GDAŃSK, POLAND, 21– 22 May 2015**

**REGISTRATION FORM**

First name:

Family name:

City/Country:

Address:

Phone/Fax:

e-mail :

Arrival date time place: airport car railway station

Departure date time place: airport car railway station

Hotel reservation from till

Request for transportation from/to airport or train station

Special requirements for food:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date and signature

**Please send this registration form to the latest by 30 April 2015**

**E-mail:** [**local.safety@ubc.net**](mailto:local.safety@ubc.net) **or** [**c.dwojak@sm.gda.pl**](mailto:c.dwojak@sm.gda.pl)

**Fax +48 58 346 28 11**