



7TH NRNA INTERNATIONAL GENERAL ASSEMBLY & NRN GLOBAL CONFERENCE

14-17 October 2015, Kathmandu, Nepal

REGISTRATION FORM

Photo

R.F.No.:

Full Name (in capital letters):

Gender: Male Female Others Professional Title(if any) :

Status: PNO NRN Nepali Others Country of Residence:
(pls specify)

Profession/Occupation: Organization or NCC:

Designation: Email id:

Contact Address:

Contact No.(country of residence): of Nepal (if any):

(For registered NRNs only) Passport No: Issued Date:

Passport Issuing Authority: Visa Expiry Date:

Registration Fee:
 US \$ 75 (For NRNs from Africa and Middle East Region and Malaysia);
 US\$ 150 (For NRNs & Friends of Nepal);
 NRs. 10,000/- (For Resident Nepalis)

Incase of Free Registration: Guest Media Sponsors *Pls provide the details*

Name: _____

Sponsor Type: _____

Submitted by : _____

Name:

Submitted on:

Official Use Only:

Remarks: Paid, specify Receipt No. _____
 Unpaid
 Others(specify) _____

**Note: - Only Cash (Nepali Rupees or US Dollars) will be accepted during registration,
 - International General Assembly is open for registered NRN members only.**