



## INTERNATIONAL SOCIETY FOR DISEASE CONTROL - ISDC

DECEMBER 1ST-4TH 2015 AND 8TH-11TH DECEMBER 2015

### CONFERENCE REGISTRATION FORM-A

#### Organization Use Only

Registration No.: **k4565540681/0661972**

*The file was opened with the following*

#### DELEGATE REGISTRATION INFORMATION

Title: Dr. ☐ Prof. ☐ Mr. ☐ Mrs. ☐ Ms. ☐

FULL NAMES:

PASSPORT NUM:

DATE OF BIRTH:

PLACE OF BIRTH:

NATIONALITY:

COUNTRY OF RES:

Your participation will be confirmed as Soon as we receive the conference registration forms which must be filled, signed and submitted along with the front page of your international passport.

You are hereby required to submit your filled forms and your reservation receipt before the deadline date to enable us forward the approval of your participation document to the U.S Embassy in your country for the processing of your visas and also to contact the airline authority to make the booking of your round trip air ticket immediately

Your traveling documents' will be processed here in California, the United States of America and you will be notified immediately after confirmation.

We will get in touch with you as soon as we receive the filled forms together with your hotel booking confirmation Receipt from Dakar, Senegal.

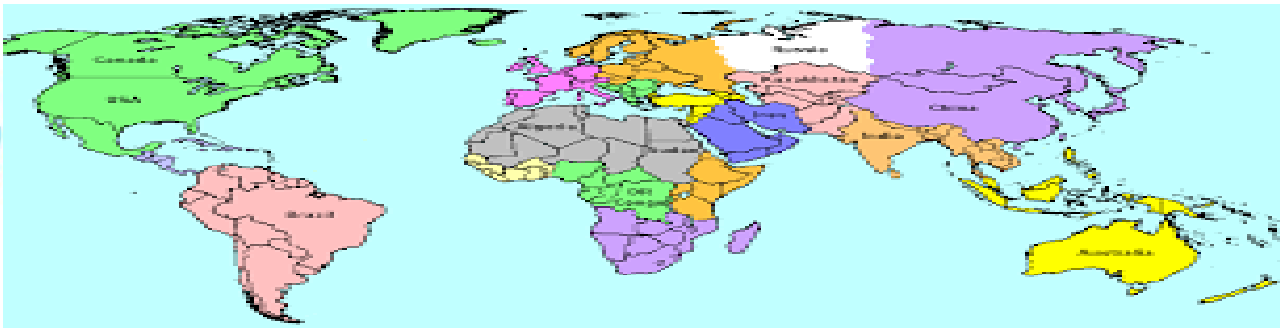
This is to inform you that you have been duly registered to participate in this forthcoming international conference. You are to fill the B & C forms with your personal details to confirm your registration and join the list of participant coming for the global conference all over the world

All filled registration forms should be submitted to the registration office for proper approval and confirmation.

Mr. David C. Christopher  
(REGISTRATION DESK)

Participants Signature

THE INTERNATIONAL CONFERENCE ON CHILD ABUSE, HIV/AIDS AND MALARIA CONTROL  
Los Angeles, California 9025-4718; United States of America  
Tel/Fax + 1-323-275-9691



## INTERNATIONAL SOCIETY FOR DISEASE CONTROL - REGISTRATION FORM-B

\*Please read clearly and if some of these categories don't apply to you then please state by writing N/A

Name (Mr. Mrs. Miss.) \_\_\_\_\_

Nationality \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Present Address (country of resident) \_\_\_\_\_

Phone Number: \_\_\_\_\_

In Case of Emergency Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email address: \_\_\_\_\_

What Languages do you speak? (In order of fluency): \_\_\_\_\_

Passport Number: \_\_\_\_\_

Type of Passport: \_\_\_\_\_

Marital Status (circle one): SINGLE MARRIED

DIVORCED

SEPARATED

Name and address of group or Organization: \_\_\_\_\_

Registration file number : \_\_\_\_\_

location of any international airport close to you: \_\_\_\_\_

MAKE YOUR RESERVATION ON THE HOTEL BELOW:

**Hotel La Résidence, Dakar-Senegal:**  
**E-mail: (reservation.hotellaresidence@africamail.com)**  
**OR (reservation.hotellaresidence@gmail.com)**  
**Contact Phone: (+221) 76-635-7602**



## INTERNATIONAL SOCIETY FOR DISEASE CONTROL - REGISTRATION FORM-C

1) Do you have relatives in the **U.S.A.** / **SENEGAL**? **YES** / **NO** (if yes, please note their address and relationship to you)

2) Describe experiences with culturally diverse situations: \_\_\_\_\_

3) Religion: \_\_\_\_\_ Do you have any dietary restrictions? \_\_\_\_\_

4) Do you have allergies to certain foods? (List foods) \_\_\_\_\_

5) Do you smoke? **YES** **NO** Can you confine your smoking? **YES** **NO** Do you have objections to others smoking?  
**YES** **NO**

6) If yes, briefly describe: \_\_\_\_\_

7) Living abroad exposes you to a lifestyle that you may not be familiar with. Will you be able to adjust to unexpected situations? \_\_\_\_\_

8) Hobbies and leisure time interests: \_\_\_\_\_

9) Have you ever been arrested or convicted of a crime? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

10) How did you know of this program? \_\_\_\_\_

You are to return this registration forms along with the scanned copy of your passport to the registration office via the following email: [ISDC\\_secretariat@usa.com](mailto:ISDC_secretariat@usa.com)