



**COUNTRY** \_\_\_\_\_

## REGISTRATION FORM

- We prefer this form to be completed through online registration service. You can read at <https://wspukenya.org/11th-general-assembly/>
- To be completed (in BLOCK LETTERS) only by people accredited to their National Scout Parliamentary Association, one form per individual.
- Please type or print clearly and return this form to the WSPU-KENYA Secretariat ([11generalassembly@wspukenya.org](mailto:11generalassembly@wspukenya.org))
- Please return this form together with a copy of your payment and a photocopy of your passport face page by **NO LATER THAN 31<sup>st</sup> JULY 2025** to the WSPU Secretariat.
- *Please completed all pages*

### Registration Category

***Please check the box representing your registration category***

- A. I am the delegate : Parliamentarians who are member of the National Assemblies, Senate and Members of Regional/ County Assemblies. (fee: USD400)
- B. I am the youth leaders representing each country – aged between 18 and 35 years. (fee: USD 200).
- C. I am an observer from National Scout Organization/Association or others (fee: USD 300).
- D. I am an accompanying person with Parliamentarians or others (fee: USD 100).
- E. I am an exhibitor from NSPAs, NSOs, or organizations in regard to youth empowerment programmes : 2 people limited. (fee: USD 300)

\*\*\* Fees are excluded accommodations and traveling costs.

***Please attach the photocopy of registration fee payment to the WSPU-Kenya secretariat: [11generalassembly@wspukenya.org](mailto:11generalassembly@wspukenya.org)***

#### Registration Fee Transfer Details

Account name; **Kenya Scout Parliamentary Association**

Bank Name; Kenya Commercial Bank

Bank Branch; Kipande House / Branch code; 101 / Bank code; 01

Swift code; KCBLKENX / Account no; 1267988460





**DELEGATE DETAILS**

<b>Salutation</b>	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Prof. <input type="checkbox"/> Other _____		
<b>Last Name</b>		<b>Middle Name</b>	
<b>First Name</b>			
<b>Name on ID Card</b>			
<b>Date of Birth</b>	(dd/mm/yyyy)		
<b>Title</b>		<b>Country</b>	
<b>Position</b>	<input type="checkbox"/> Member of Parliament <input type="checkbox"/> Officer <input type="checkbox"/> Others		
<b>Please Specify</b>	<input type="checkbox"/> Head of Delegation <input type="checkbox"/> Diplomatic corps <input type="checkbox"/> Accompanying Person <input type="checkbox"/> Press	<input type="checkbox"/> Delegate <input type="checkbox"/> Young Leader <input type="checkbox"/> Delegation Secretary <input type="checkbox"/> Others: _____	
<b>E-mail</b>		<b>Mobile No.</b>	

**PERSONAL HEALTH INFORMATION**

<b>Diet</b>	<input type="checkbox"/> Halal <input type="checkbox"/> Vegetarian <input type="checkbox"/> Non Vegetarian
<b>Food Allergies</b>	
<b>Covid Vaccination</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Other Specifications</b>	

**PASSPORT DETAILS**

<b>Passport Type</b>	<input type="checkbox"/> Diplomatic <input type="checkbox"/> Official <input type="checkbox"/> Ordinary <input type="checkbox"/> Other: _____		
<b>Passport Number</b>		<b>Place of Issue</b>	
<b>Date of Issue</b>		<b>Date of Expiry</b>	

**TRAVEL INFORMATION**

	Date	Time	Flight Number
<b>Arrival (Nairobi)</b>			
<b>Departure (Nairobi)</b>			