ISAO CONFERENCE
INTERCESSORS ARISE
-A Call to Prophetic Intercession-

SRI PRASANSARAMAYA

WALPOLA – RAGAMA
SRI LANKA
Tel No: +94 11 5735270, 5232548
FAX : +94 11 2230490

KITHU DANA PUBUDUWA

From Wednesday the 22nd Jan (5.00 p.m.) To Saturday the 25th Jan, 2014 (8.00 p.m.)

ORGANIZED BY THE ICCRS SUB-COMMITTEE FOR ASIA OCEANIA (ISAO) & HOSTED BY KITHU-DANA PUBUDUWA SRI LANKA

Registraton No:	

Instructions:

(Fill - in data in BLOCK letters. Tick ☑ whichever is applicable. In case data is Not Applicable/Not Available, write N/A)

1. Each applicant shall submit ONE Registration Form duly completed and signed.
2. Completed registration forms are to be sent to KITHU DANA PUBUDUWA (office@pubuduwa.org) with a letter of endorsement from the National Service Committee for ISAO in their country. Payment to be made to KITHU DANA PUBUDUWA account number as given below. Registration is taken as confirmed only upon receiving payment.
3. Overseas participants who wish to stay for a few more days after the 27th Sri Prasansaramaya will arrange accommodation at a cost of US$ 50 per day (Including food).
4. Payment by bank draft or Telegraphic Transfer to:

   Bank name : **HATTON NATIONAL BANK**
   Address : **NO.60, TEWATTE ROAD, RAGAMA, SRI LANKA**
   Account name : **KITHU DANA PUBUDUWA**
   Account no : **102010007823**
   Swift Code : **HBLILKLX**

5. Any participants who wishes to make payment upon arrival should receive prior approval from Kithu Dana Pubuduwa.
6. Registration closes on 15 December 2013. Due to limited space, please book early as registration is based on a first come first served basis.
7. For enquiries, contact Mrs. Preena Dewdini (office@pubuduwa.org) or Mrs. Ranjana Kaviratne (rkaviratne@hotmail.com) via email.
8. Sight Seeing –Date 26.01.2014. Details and the pictures of the geographical areas will be uploaded in our web site : **kithudanapubuduwa.org** in due course.

Registration Details:

Name: Mr. Ms. Rev. _____
Family Name/Surname: _____
Passport No: _____ Residing Country: _____
Nationality: _____
Address: _____
Phone No 1: _____ 2: _____
Email/Fax: _____
Age: _____ Gender: Male☐ Female☐ Marital Status: Single☐ Married☐ Other: _____
NSC: _____ Contact Person: _____
Contact email: _____

Transportation Details:

Do you require transportation from Airport? Yes☐ No☐
Arrival Flight No: _____ Date: _____ Time: _____
Departure Flight No: _____ Date: _____ Time: _____

Accommodation Details:

Per person US $260 - (includes Registration, Accommodation, Meals)
Sightseeing tours: Down south US $80 Yes☐ No☐
Kandy US $90 Yes☐ No☐
Additional days of stay needed US $50.00 per day: _____ Days Total amount (US$): _____
Signature of Applicant: _____ Date: _____

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ACKNOWLEDGEMENT OF REGISTRATION FORM & FEE

Registration No	

Received with thanks from:	
A Fee of:	US $:

In-charge of Registration: _____ Signature: _____ Date: _____

(Please bring and produce this receipt upon arrival at the reception desk for registration)