

**REGISTRATION FORM**

**Senior Women Talent Pipeline**

**Kindly complete this Registration Form in English and return it as soon as possible.**

Life Guards

SWEDINT Training Centre Fax: +46 (0)8 584 526 20 **E-mail:** [**swedint@mil.se**](mailto:swedint@mil.se)

Course Admin Office

SE-196 85 KUNGSÄNGEN

Sweden

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| --- | --- |
| **PERSONAL DATA** Male  Female | |
| First name: | Family name: |
| Date of birth: | Nationality: |
| Company/Agency: | Rank/Profession: Date of rank: |
| Passport number: | Valid until: |
| Residence: | |
| Phone number, home: \*) | Phone number, work: \*) |
| Cellular Phone number: \*)    Facsimile: \*) |  |
| E-mail: | |
| \*) In case of emergency | |
| Special Dietary or food requirements due to medical or religious reasons: Yes  No | If yes, please specify articles or food you cannot eat: |

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| --- | --- | --- | --- |
| **ARRIVAL at the airport in Stockholm** | | **DEPARTURE at the airport in Stockholm** | |
| **Airport:**Arlanda Airport  Bromma Airport | | **Airport:** Arlanda Airport  Bromma Airport | |
| **Date:** | **Date:** | **Time:** | **Time:** |
| **Flight number:** | **Flight number:** | **Terminal:** | **Terminal:** |

*Transportation from the airport will be arranged. The driver will be in the arrival hall,   
 carrying a sign saying “SWEDINT”.*