FY-13 GEOPOLITICAL SEMINAR REGISTRATION

Requested Date: _____

Alternate Date: _____

Last Name: _____

First Name: _____

Rank / Grade: _____

Job Title: _____

Name of Unit/Organization: _____

Location of Unit/Organization: _____

Email: _____

Phone: _____

Attendees may bring spouse at their own expense (€429 plus travel expense), provided that double rooms are available. The €429 includes meals, accommodations, and classroom sessions and must be paid upon arrival at the institute.
If your spouse will accompany you please provide below information.

Last Name: _____

First Name: _____

Unit/Organization has authorized Training and TDY

Date _____ Signature _____

email to: ocpa.pi@eur.army.mil or elke.herberger.ln@mail.mil