



FRATERNIDAD DE ANTIGUOS SCOUTS Y GUIAS DEL URUGUAY
ISGF - Central Branch Member
South American Subregion Member



5th South American Subregion Gathering

Uruguay, 2 - 4 November 2018

REGISTRATION FORM

Name and Surname

Birth Date:

 / /
dd / mm / yyyy

Age

Sex: M

F

Kind of ID document

Number:

HOME ADDRESS

City

Country

E- mail

Web page or Blog

Mobile

You are/were: SCOUT:

GUIDE:

OTHER:

OTHER:

Denomination of your Adult Group (if any)

Representing Country

Polo Shirt size:

S

M

L

XL

r

Other

HOTEL ACCOMMODATION (includes three nights and twelve meals)

5 per room
U\$S 320 p/p

Double
U\$S 420 p/p

Single
U\$S 520

WILL JOIN OPTIONAL TOUR POST CONFERENCE ?

YES

NO

MEDICAL INFORMATION

ALLERGIES :

MEALS SPECIFICATIONS:

REGULAR MEDICATION:

MOBILITY LIMITATIONS ?:

YES

NO

TRAVEL INSURANCE:

EMERGENCY CONTACT

NAME

Phone number :

Country code + number

EMERGENCY CONTACT IN URUGUAY - NAME

Phone number :

Country code + number

REGISTRATION FEE - PAYMENT TERMS

Payments can be done in two parts. First part is to be done before 15 of May, 2018, no less than U\$S 120

Total amount is to be completed before 1st. September, 2018

Registrations after 15 May are to pay the total personal amount

Payments are to be done to the following account in US Dollars, free of any charges or discount :

Banco República Oriental del Uruguay Swift code BROUUYMM account 186 0752464, name Teresita Pais

Please, include your name as a reference to identify your payment with the registration form.

CANCELLATION POLICY:

If cancelled before 15 May 2018: total refund (less banking fees)

If cancelled from 15 May 2018 to 1 August 2018: 50% refund (less banking fees)

If cancelled after 15 August 2018: there is no refund

Sending date

dd / mm / yyyy

E-mail to: fasguruguay@gmail.com

Registrant's Signature